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BOROUGH OF PONTEFRACT

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH  
FOR THE YEAR ENDED 31ST DECEMBER, 1948

To the Mayor, Aldermen and Councillors  
of the Borough of Pontefract.

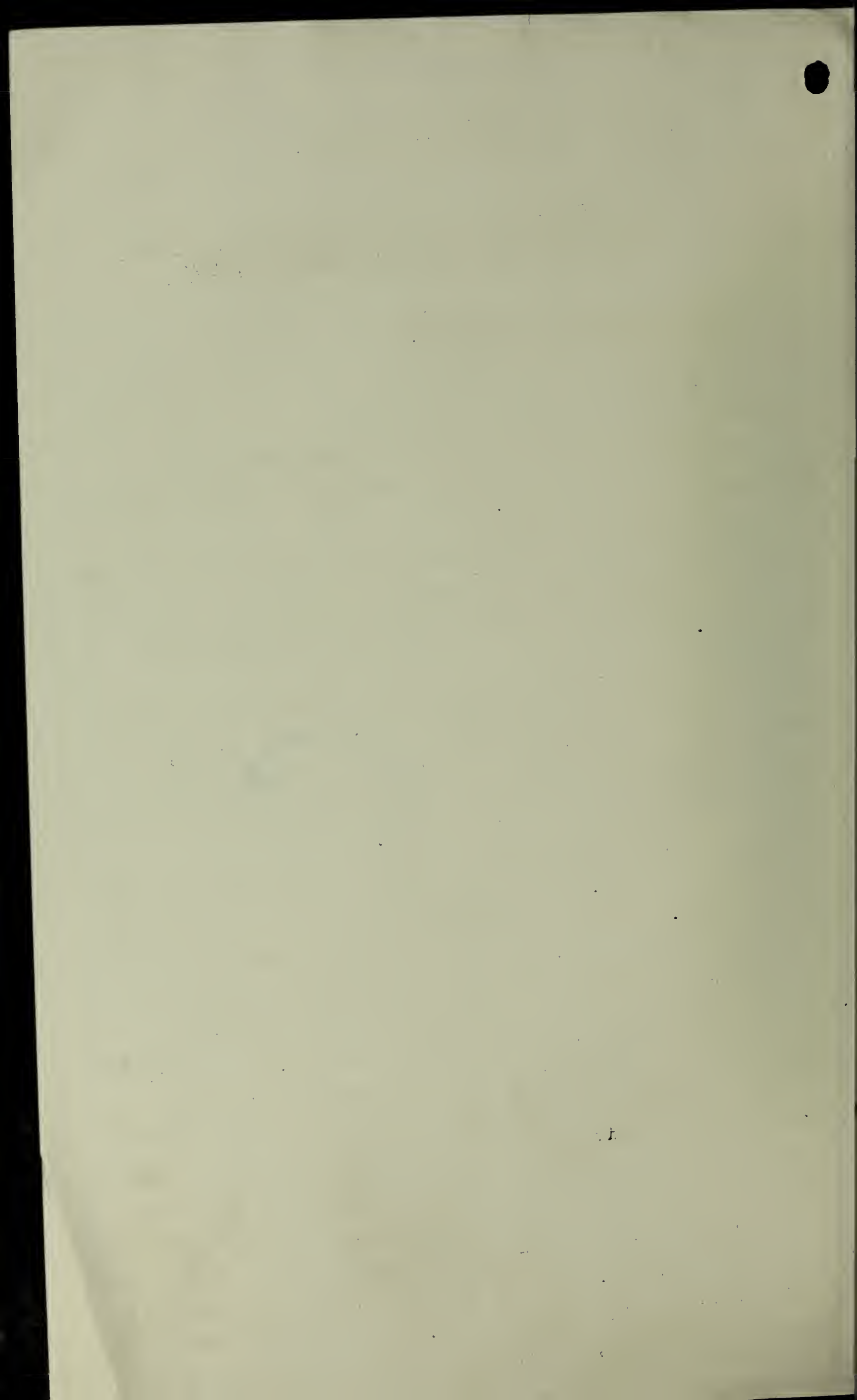
Gentlemen,

I have the honour to present for your information and consideration a Report on the Health and Health Services of the Borough during the year 1948.

The Annual Report of the Chief Sanitary Inspector dealing with the Sanitary Circumstances of the Borough, Housing and the Inspection and Supervision of Food Supplies is complementary to this Report.

The report contains details of certain health services which are not now the responsibility of the Council of the Borough, but I feel it is desirable that a report on all the health services should be embodied in one document and that the Council would like to have this information at their disposal.

The year 1948 stands out both locally and generally as a landmark in social medicine. A National Health Service was established in Great Britain. The need to have all medical services available to everyone as a right of citizenship and a primary function of national policy has been felt by all nations which share our language and have the same basic political philosophy. Australia and South Africa are at the present time working out National Health Schemes similar to our own, and New Zealand did so before we did. Even in the United States of America, where the autonomous powers of the individual states make it difficult for the Federal Government to carry out a National Health Policy, much has been done by the award of Federal-Grants-in-Aid to level up the health services in that continent, and the institution of a National Health Service is believed by many to be imminent. It is safe to say that of all these countries, Britain is the most advanced and has a





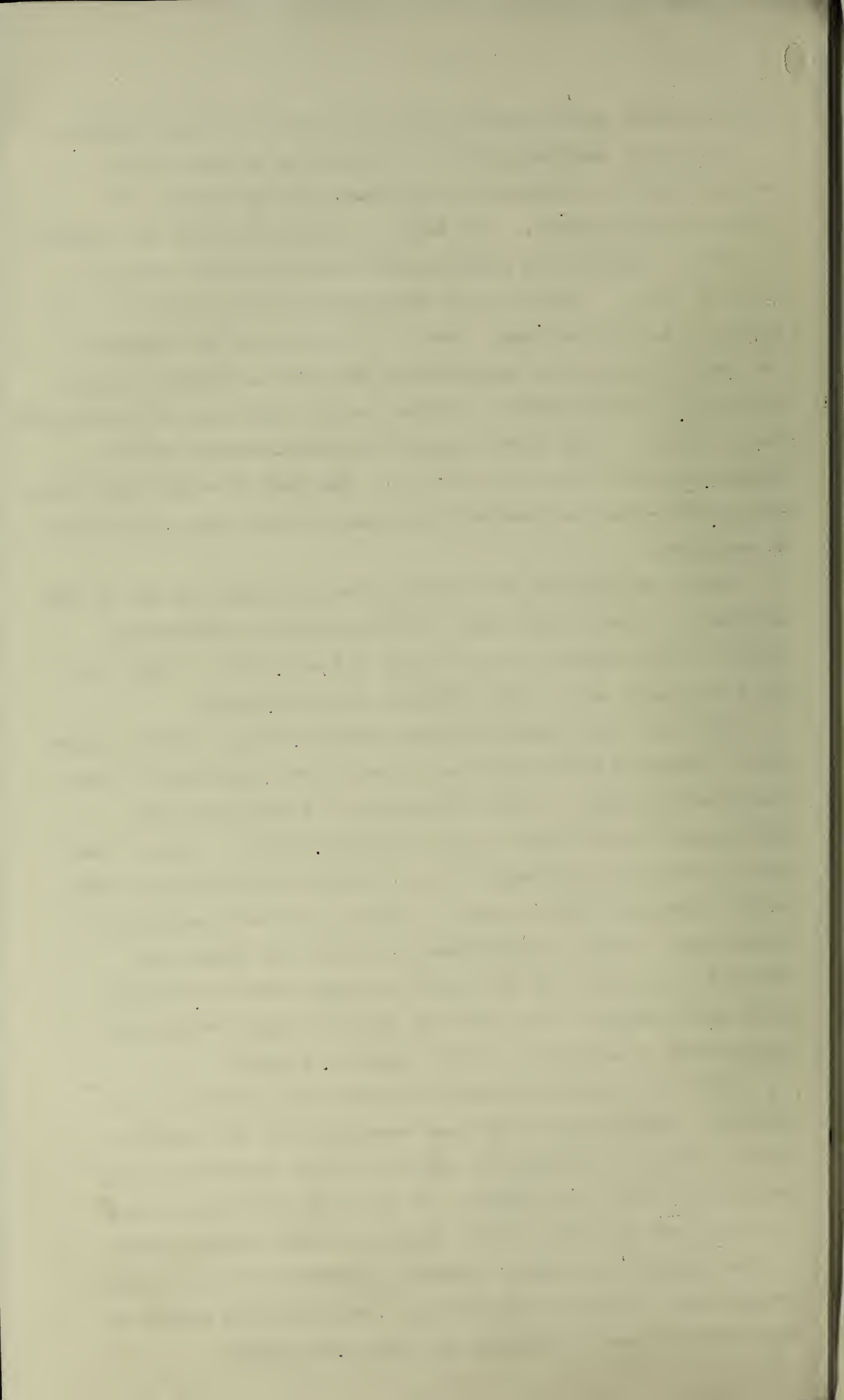
Health Service most resembling what she wants at the present time.

It is not surprising that the setting up of such a vast organisation has produced its own troubles, many of them of considerable magnitude. The Regional Hospital Boards are striving to set up a complicated administrative machine in the shortest possible time. There are too few hospital beds, and far too few nurses to look after them. Even more serious is the shortage of bed and sanatorium accommodation for the tuberculous patient - a state of affairs likely to reflect on the incidence of tuberculosis in the future. The Dental Service has been over-run and the ambulance service stressed severely. The rush to obtain spectacles and hearing-aids has produced long delays before these articles can be supplied.

We are hindered in our progress towards health for all by the shortage of houses - the number of applicants for Corporation houses on the register at the end of 1948 was 1,460. There are too few schools and too many children in the classes.

1948 also saw changes in local administration. For the first time a full-time Medical Officer of Health was appointed to serve Pontefract Borough, the Urban Districts of Featherstone and Knottingley and the Rural District of Osgoldcross. At the same time he was made responsible for the administration of the County Health Services in these areas. It was hoped that setting up a health unit covering a population of 50,000, and making one official responsible for all health services within this unit, would make possible a more personal type of administration and satisfactory co-ordination of the services offered.

The National Health Service Act came into operation on the 5th July, and although it produced revolution in the country's medical services generally, the effect on Local Authority Health Services was much less marked. On that date Pontefract ceded its Maternity and Child Welfare Services to the County Council, a change deplored by many. However, against the loss of local powers there are some compensations. Staffing, and relief for holidays and times of sickness are made much easier.



It is once more possible to combine in the same individual the duties of Health Visitor and School Nurse. This process makes possible continuity of supervision of a given family by the same member of the staff, and this is in accordance with the present important aim of dealing with the family as a 'health unit.' It is likely that the duties of the Health Visitor in this respect will extend rapidly during the next few years until the whole of the family is her province, not only the baby, the toddler, the school-child and the expectant mother, but also the convalescent and the aged adult.

The Clinic facilities in the Borough are at present quite inadequate. The likelihood of the Borough having a Health Centre at some time in the future is not yet known but is under consideration. Meanwhile, efforts to improve the present position by seeking alternative accommodation for the school dentist, and by certain minor structural alterations to the present premises, are proceeding.

There is a great need in the Borough for a Maternity Home. At the present time our cases have beds allocated to them through the County pool. These beds are available at Hazlewood Castle, Tadcaster; Walton Hall, near Wakefield; the Castleford Maternity Home; and occasionally at Staincliffe, near Dewsbury. In view of the delay necessarily entailed in getting patients to hospital, as well as the heavy load thus placed upon the ambulance service, this state of affairs cannot be regarded as satisfactory. Nor is the accommodation available sufficient to meet the demand. At the present time priority is given to a mother having her first baby or where the home conditions are unsuitable for a domiciliary confinement, and most cases coming into these categories are being accommodated. Cases which do not come into the above categories however, usually have their applications refused.





P A R T O N E

STATISTICS AND SOCIAL CONDITIONS

Area of the Borough : 4,865 acres

Registrar-General's estimate of civilian population : 22,430

Number of Inhabited houses (end of 1948) according  
to Rate Books : 5,784

Rateable value : 1948 - £129,543. 1947 - £130,645

Sum represented by penny rate : 1948 - £532. 1947 - £517.

VITAL STATISTICS - (Registrar-General's - Registered during the  
year)

Live Births

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	230	232	462
Illegitimate	19	10	29
Total	<u>249</u>	<u>242</u>	<u>491</u>

Birth rate per 1,000 estimated civilian population : 21.89.

Percentage of illegitimate births : 5.9.

Still Births

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	2	8	10
Illegitimate	-	-	-

Rate per 1,000 total (live and still births) : 19.9

Rate per 1,000 estimated civilian population : .45

Deaths

	<u>Male</u>	<u>Female</u>	<u>Total</u>
All age groups	125	94	219

Infants under 1 year

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	10	9	19
Illegitimate	<u>1</u>	<u>-</u>	<u>1</u>
	11	9	20

Maternal Deaths

N I L

There were 70 fewer births in 1948 than in 1947, showing a fall of 4.21 per 1,000 in the birth rate. The percentage of illegitimate births has risen slightly by 1.18. Still-births have been reduced by 2 and it is gratifying to note that the number of deaths in infants under one year dropped by 8 - a significant amount.





The total number of deaths has risen very slightly. Once again I am able to report that there have been no maternal deaths during the year.

### Death Rates

General rate per 1,000 population	9.76
All infants per 1,000 live births	40.7
Legitimate infants per 1,000 legitimate live births	41.1
Illegitimate infants per 1,000 illegitimate live births	34.5
Maternal deaths per 1,000 live and still births	N I L.

The principal causes of death are set out in the following Table.

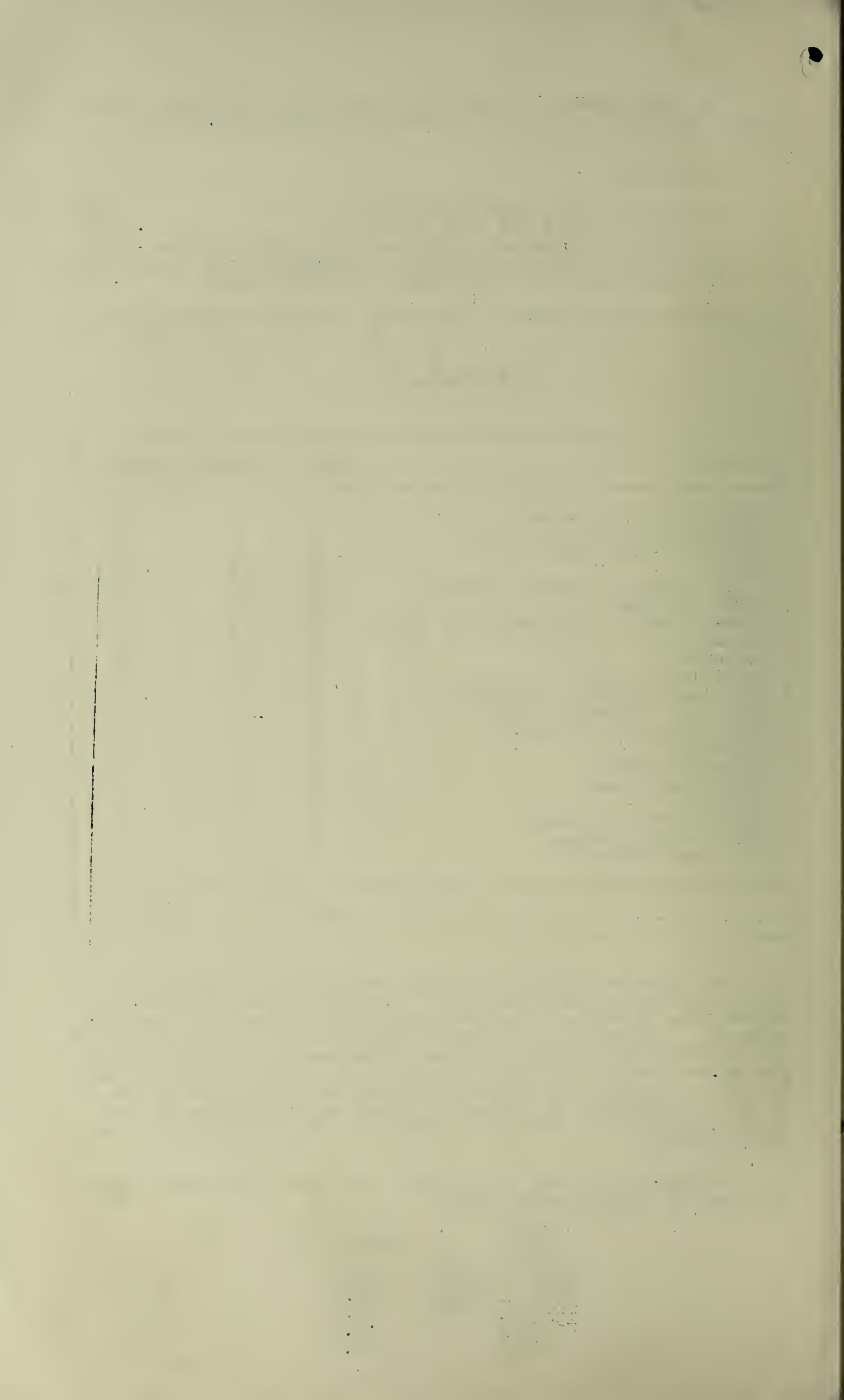
T A B L E I

Causes of Death	Male	Female	Total
Tuberculosis, pulmonary	7	6	13
Tuberculosis, non-pulmonary	-	1	1
Syphilitic Diseases	2	1	3
Cancer	19	23	42
Intra-cranial vascular lesions	10	11	21
Heart Diseases	28	22	50
Other diseases of circulatory system	2	3	5
Bronchitis	16	8	24
Pneumonia	4	5	9
Other respiratory diseases	3	1	4
Ulcer of stomach or duodenum	2	-	2
Diarrhoea (under 2 years)	1	-	1
Other digestive diseases	2	2	4
Nephritis	3	2	5
Premature Birth	3	3	6
Congenital causes	5	2	7
Suicide	3	1	4
Road traffic accident	1	1	2
Other violent causes	6	-	6
All other causes	8	2	10
	125	94	219

Of the major killing diseases, tuberculosis produced 14 deaths in 1948 compared with half that number the previous year. Cancer also showed an increase, producing 42 deaths as compared with 30. On the credit side of the account it is gratifying to note the reduction of deaths from diarrhoea in infants under the age of two years. In 1948 there was only one as compared with 9 in 1947. Deaths in premature infants were also reduced from 8 to 6. It is hoped by energetic attack on the problem of the premature infant to reduce the number of deaths from this cause even further.

Improvement in the local death rate during the past decade is shown in the following Table.

<u>Years</u>	<u>Death Rate</u>
1938 - 1940	13.1
1941 - 1943	12.2
1944 - 1946	10.8
1947	10.1
1948	9.76



# Infant Mortality

The following Tables give causes of infant deaths during 1948 classified into age groups and months of incidence.

T A B L E    II

Causes of Death									All ages under 1 yr.		
	Under 1 wk.	1-2 wks	2-3 wks	3-4 wks	1-3 mths	3-6 mths	6-9 mths	9-12 mths	M.	F.	Tot
Bronchitis	-	-	-	-	-	1	-	-	-	1	1
Pneumonia	-	-	-	-	-	5	-	-	2	3	5
Gastro-enteritis	-	-	-	-	-	1	-	-	1	-	1
Prematurity	4	-	-	-	2	-	-	-	3	3	6
Atelectasis	1	-	-	-	-	-	-	-	1	-	1
Congenital malformation	1	-	-	-	-	1	-	-	-	2	2
Birth injuries	4	-	-	-	-	-	-	-	4	-	4
	10	-	-	-	2	8	-	-	11	9	20

T A B L E    III

Causes of Death	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
Bronchitis	-	-	-	-	-	-	-	-	1	-	-	-
Pneumonia	1	2	-	-	-	-	1	1	-	-	-	-
Gastro- enteritis	1	-	-	-	-	-	-	-	-	-	-	-
Prematurity	2	-	1	-	1	-	-	-	-	1	1	-
Congenital causes	1	-	-	1	1	-	2	-	2	-	-	-
	5	2	1	1	2	-	3	1	3	1	1	-

Total    -    20





Comparison of Pontefract Borough Statistics with West Riding Urban Districts, West Riding Administrative County and England and Wales.

T A B L E IV

	Pontefract Borough District	Aggregate West Rid- ing Urban Districts	West Riding Admin. County	England & Wales (Pro- visional figures)
BIRTH RATE (Per 1,000 estimated population)	21.9	18.3	18.5	17.9
DEATH RATES (All per 1,000 estim- ated population)				
All Causes	9.8	11.8	11.3	10.8
Zymotic Diseases (seven principal)*	0.4	0.12	0.12	*
Tuberculosis of Respiratory system	0.58	0.37	0.37	0.44
Other forms of Tuberculosis	0.04	0.07	0.07	0.07
Respiratory dis- eases (excluding Tuberculosis of respiratory system	1.65	1.34	1.29	*
Cancer	1.87	1.83	1.74	1.86
Heart and circulat- ory Diseases	2.45	3.98	3.73	*
INFANT MORTALITY (Deaths under one year, per 1,000 live births)	41	38	39	34
DIARRHOEA (Deaths in infants under 2 years of age, per 1,000 live births)	2.04	4.17	4.38	3.3

\* figures not yet to hand

It will be noted that while our Birth and Death Rates compare favourably with those of the country as a whole, our Infant Mortality Rate still stands rather high.





P A R T   T W O

PREVALENCE OF AND CONTROL OVER  
INFECTIOUS AND OTHER DISEASES.

The following Table gives details of the incidence of notifiable diseases (other than tuberculosis).

T A B L E   V

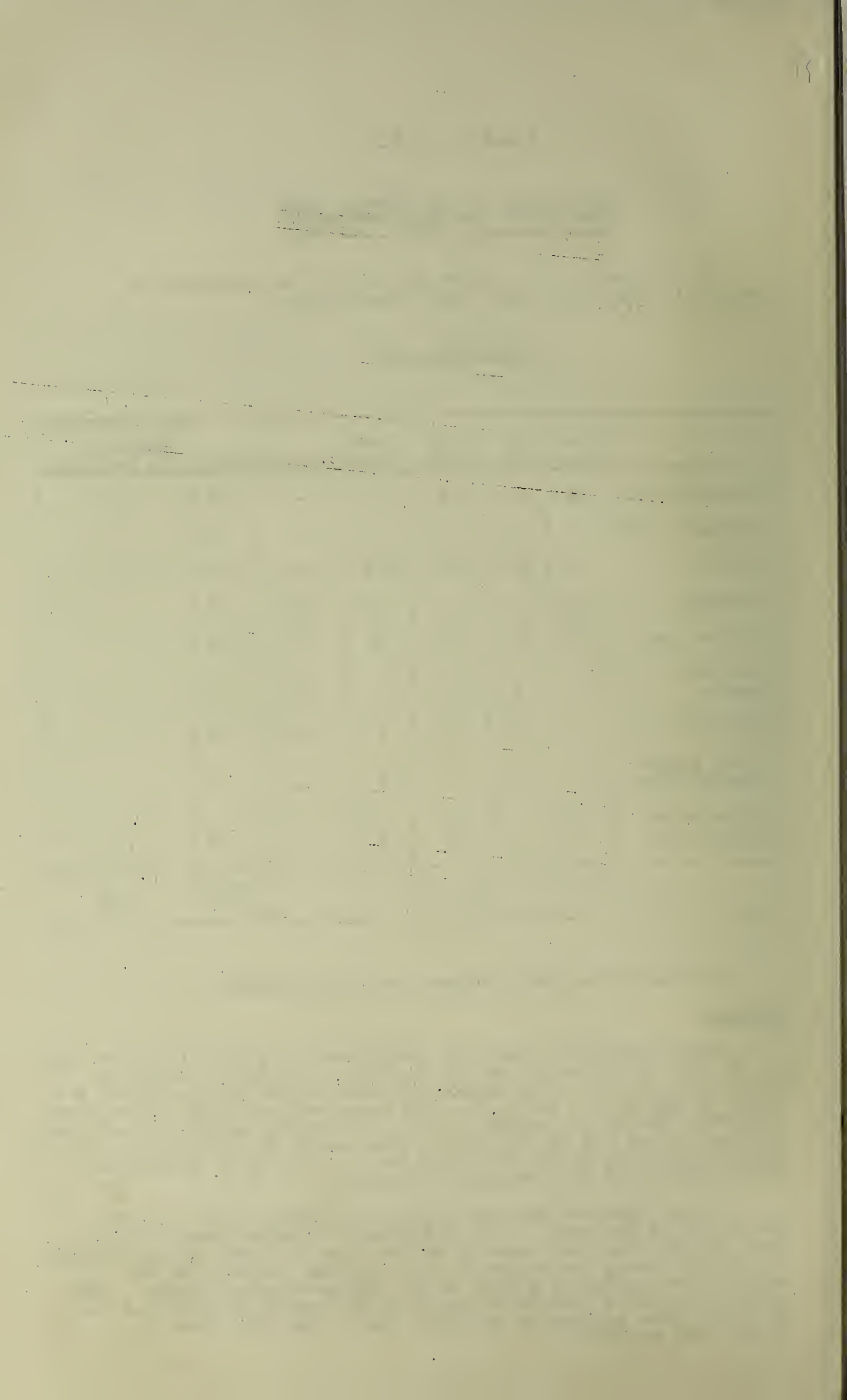
	Jan/ Mar	Apr/ June	July/ Sept.	Oct/ Dec.	Deaths	Total	No. of cases admitted to hospital
Scarlet Fever	21	34	33	40	-	128	128
Whooping Cough	24	10	7	5	-	46	-
Measles	4	25	59	279	-	367	4
Pneumonia	2	4	4	8	5	18	-
Chicken-pox	18	83	38	35	-	174	-
Puerperal Pyrexia	1	1	2	1	-	5	5
Erysipelas	-	2	3	2	-	7	-
Acute polio- encephalitis	-	-	-	1	-	1	1
Ophthalmia Neonatorum	-	-	-	3	-	3	1
						749	138

Certain of the above figures call for comment.

Measles

This disease has only been compulsorily notifiable since 1940. It is already evident, however, that its incidence follows a two-yearly cycle. The number of cases begins to rise about the month of April of a given year and increases steadily, apart from a "notch" during the months of July and August, until the peak is reached at the end of the year. The number then falls until it is minimal by March of the following year. A year of quiescence then follows and the process is repeated.

It was expected that 1948 would be a "peak" year and this proved to be the case. The incidence of measles cases in the West Riding conformed exactly to the above pattern, though in more localised areas, the outbreaks were shorter and sharper and occurred at different points of the epidemiological curve. The main outbreak in Pontefract began at the end of October and the peak had been reached by the last week in the year when 94 cases were notified.





It is now accepted that the administration of serum from a person convalescing from the disease affords some protective action. If given within a very short period following exposure it succeeds in at least 30 per cent of cases in preventing an attack altogether, though the immunity so conferred is not lasting. If given a longer period after exposure to infection, the patient has his attack of the disease, but it is much modified in character, and complications are rare.

At the time the measles epidemic was prevalent a circular letter was sent to all general practitioners in the area explaining that a supply of this serum was available from the County Laboratory at Wakefield, though shortage of supplies compelled its restriction to children under the age of three years, as this was the age group in which measles was most harmful. The service was, however, only used to a very limited extent by the general practitioners.

#### Chicken-pox

This disease was also prevalent in the Borough during the year, peaks being reached in the middle of June and at the beginning of December.

#### Scarlet Fever

Although a steady incidence of scarlet fever occurred throughout the year, at no time did the disease assume epidemic proportions. Cases on the whole were mild in character.

#### Poliomyelitis and Polio Encephalitis

The Borough was fortunate in escaping any cases of poliomyelitis, despite the prevalence of the disease in the West Riding during 1948. The one case of polio encephalitis notified was a child from South Kirkby who had been admitted to Pontefract General Infirmary. It was removed forthwith to Brierley Isolation Hospital and no further cases occurred.

The total number of cases of infectious disease notified shows an increase of 154 on last year's figure and this increase can be attributed mainly to the measles epidemic.

It is gratifying to note that not a single case of diphtheria occurred in the Borough.

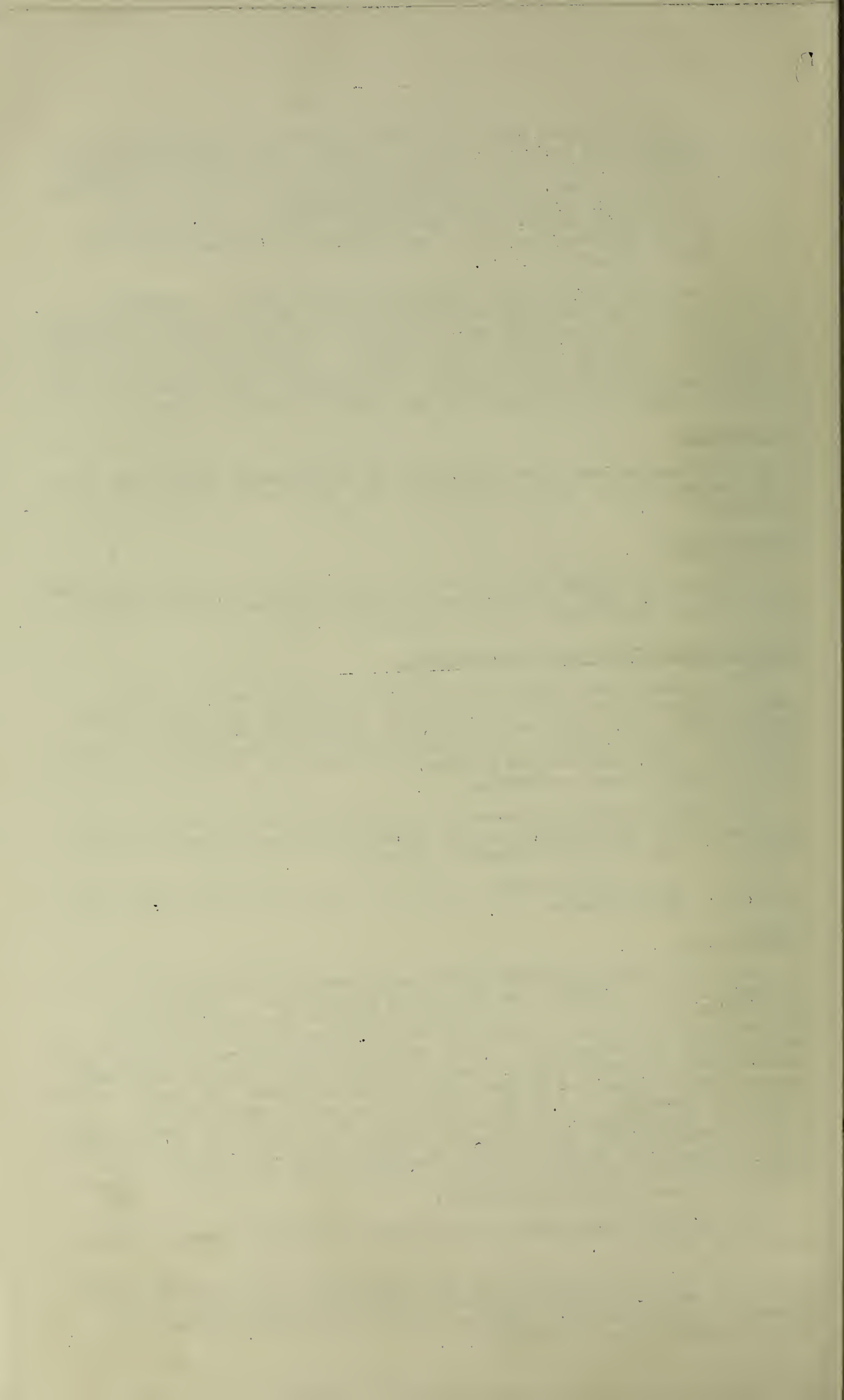
#### IMMUNISATION

Much work was done during the year towards obtaining satisfactory immunisation figures for the child population. A special immunisation session was introduced weekly at the Clinic in May. The sessions were held at 3-0 p.m. on a Tuesday afternoon, and the response was encouraging. It is current practice now to carry out immunisation somewhat earlier than heretofore and efforts were made to get babies immunised as soon after they attained the age of eight months as possible. Actually during the year a total of 152 babies in the Borough had received their full course of immunisation before attaining the age of twelve months, 102 of these immunisations being carried out at the Clinic. Holding a separate session for immunisation did something towards reducing the congestion at the ordinary Infant Welfare Sessions.

679 children completed a full course of primary immunisation during the year.

It is now recognised to be desirable that all children should receive a "booster" immunisation on attaining school age, and a thorough comb-out of the schools resulted in 1,037 children being given a reinforcing injection.





The following Table shows the incidence of the disease in the Borough since 1942, together with the deaths occurring and the percentage of child population immunised.

T A B L E VI

Year	No. of cases of diphtheria	No. of deaths due to diphtheria	Percentage of child population immunised against diphtheria :	
			Under 5	Over 5
1942	55	3	11.9	48.6
1943	52	2	30.5	74.4
1944	20	1	29.1	78.7
1945	5	-	42.0	68.7
1946	4	1 (adult)	66.3	76.2
1947	1	-	51.1	76.5
1948	-	-	57.7	79.1

TUBERCULOSIS

The following Table summarises particulars contained in the Register of tuberculous persons.

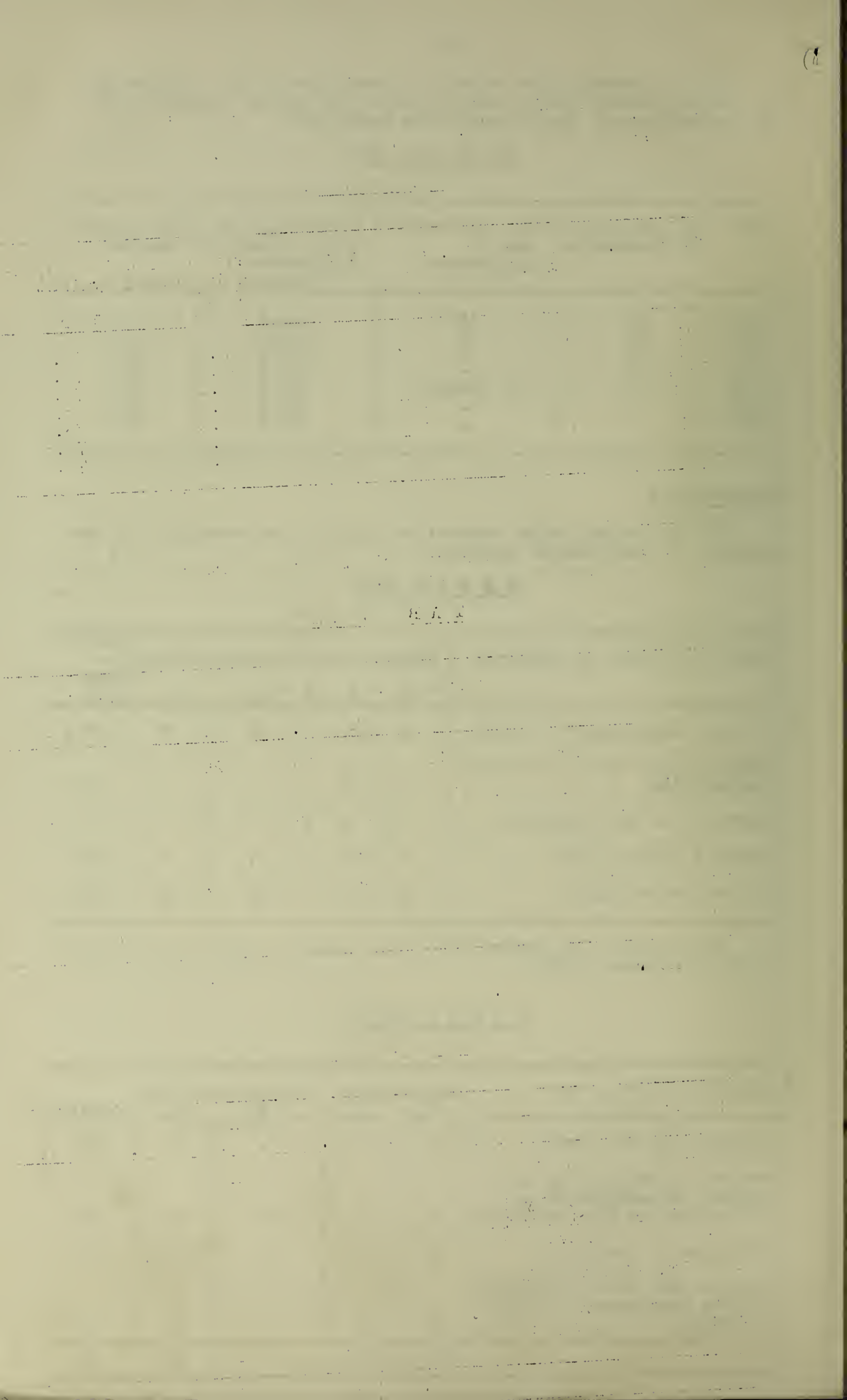
T A B L E VII

Number of cases in Register	Respiratory		Non-Respiratory		Total in Register
	M.	F.	M.	F.	
At the commencement of 1948	92	55	25	25	197
Notified for the first time during 1948	22	15	4	4	45
Restored to the Register	-	1	-	-	1
Removed during 1948	27	20	7	6	60
At the end of 1948	87	51	22	23	183

The reasons for removal of cases from the register are given in the following Table.

T A B L E VIIA

Entries relating to-	Respiratory		Non-Respiratory		Total
	M.	F.	M.	F.	
Persons who have died	11	6	-	2	19
Persons certified by the medical practitioner in attendance to have recovered	8	8	6	3	25
Revision of diagnosis	2	1	1	-	4
Persons who have ceased to reside permanently in the district	5	5	-	2	12
	26	20	7	7	60





In the following Table new cases and mortality are classified according to age, sex and site of the disease.

T A B L E VIII

Age Periods	NEW CASES				DEATHS			
	Respiratory		Non-Resp.		Respiratory		Non-Resp.	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 5	-	-	2	1	-	-	-	1
Under 15	-	-	-	1	-	1	-	-
Under 25	6	5	1	2	-	2	-	1
Under 35	2	4	-	-	1	-	-	-
Under 45	3	3	-	-	1	1	-	-
Under 55	7	-	1	-	4	1	-	-
Under 65	3	1	-	-	3	1	-	-
Over 65	1	2	-	-	2	-	-	-
Totals	22	15	4	4	11	6	-	2

At the end of 1948 the register contained 14 fewer cases than at the end of 1947. Nevertheless, a study of the figures for the two years does not make encouraging reading. Notifications of new cases for the year show an increase of 14. Deaths during the year show an increase of 10. Certifications of recovery on the other hand have increased by 22.

One disquieting feature which emerges from a study of the age group table is the increased incidence and increased mortality in the younger age groups. Thus the number of new cases of pulmonary tuberculosis under the age of 45 shows an increase of 9. Again, in 1947 there were no deaths under the age of 45 from pulmonary tuberculosis. In 1948 there were 6, of which three occurred under the age of 25.

Owing to the relatively small numbers involved it would be unwise to attribute too much significance to these figures, but it is to be hoped they do not represent a general trend.

### P A R T T H R E E

#### MATERNITY AND CHILD WELFARE

The Health Visiting staff at the beginning of 1948 consisted of one full-time and one part-time nurses. With the change-over on the 5th July, combined health visiting and school nursing duties were taken on by the three members of the staff concerned.

In spite of the greatly increased demands on the time of the staff made by the additional clinics now being held, the amount of outdoor visiting done has slightly exceeded that of the previous year. A special word of tribute should be paid to the work of the health visiting staff for the work they have done and for the friendly, informal atmosphere they have produced at the Clinics.





The number of visits paid by nurses were as follows:-

	<u>First Visits</u>	<u>Total Visits</u>
To expectant mothers	97	294
To children under 1 year	446	2838
To children 1-5 years	-	5791

### Child Welfare Clinics

It was felt to be necessary to increase the amount of time given over to the Monday Child Welfare Clinic sessions, and in April a morning session was instituted from 10-30 to 12 noon. The duration of the afternoon session was also increased from 2-0 p.m. to 4-0 p.m. This step, together with the separate session for immunisation has done something towards decreasing the great congestion at these Clinics, but even so, they have shown a tendency to over-run. The morning session has proved to be very popular and now draws an attendance almost as great as the afternoon one.

Mothers are encouraged to bring their babies to the Clinic each week for weighing and obtaining general advice from the Health Visitors. Babies are seen by the Medical Officer weekly up to the age of one month, fortnightly up to three months and monthly from that age up to one year. These consultations are minimal and any mother wishing to see the Medical Officer may do so. Most mothers avail themselves of this opportunity.

It is gratifying to note that three children out of every four born in the Borough attend the Clinic at least once.

The attendances were as follows:-

Total number of children under five years of age who first attended at the Centre during the year, and who, on the date of their first attendance were :-

Under 1 year of age	374
Over 1 year of age	75
Total -	449

Total number of children under five years of age, who attended at the Centre during the year, and who, at the end of the year, were :-

Under 1 year of age	321
Over 1 year of age	347
Total -	668

I should like also to thank the ladies of the Voluntary Committee for the good work they have put in, which has done so much to relieve the weight of work from the shoulders of the nursing staff.

### Ante-Natal Clinics

These were held weekly on Friday morning, and in April it was decided to extend their time. They are now held from 9-15 to 12 noon, though again they show a marked tendency to over-run.

During the year under review 481 expectant mothers attended the Clinic. The procedure adopted is for the expectant mother to attend once a month during the early part of pregnancy and either fortnightly or weekly as required in the later stages. All cases are seen by the Medical Officer and full clinical examinations are given at the first visit, at the thirty-fourth and thirty-sixth weeks. At the remaining visits routine tests are done and any abnormality presenting itself is dealt with.

The mothers are also encouraged to attend for a post-natal examination when the baby is six weeks old. Twenty-one such examinations were given and it is likely that this number will increase considerably in the future.





*[Faint handwritten notes at the bottom of the page]*

The following proprietary preparations were available at cost price (free in necessitous cases) to all women attending the Clinics:-

Ostermilk (Nos. 1 & 2)	Benax
Humanised Trufood	Virol
Cow & Gate	Virolax
Lactogol	Farex
Ovaltine	Adexolin
Glucodin	

The following were distributed free of charge:-

I.C.D. Tablets  
Ferrous Sulphate Tablets  
Viteolin Tablets

During the year, 26 women were sent to the Maternity Hospital at Leeds; 24 to Hazlewood Castle Maternity Home; 57 to Walton Hall Maternity Home; 9 to the Wakefield General Hospital, and 6 to Castleford Maternity Home; but in the big majority of normal cases domiciliary arrangements were made.

For domiciliary confinements the full establishment of staff is now in operation, comprising four midwives and a relief midwife. All have been or are being provided with a car.

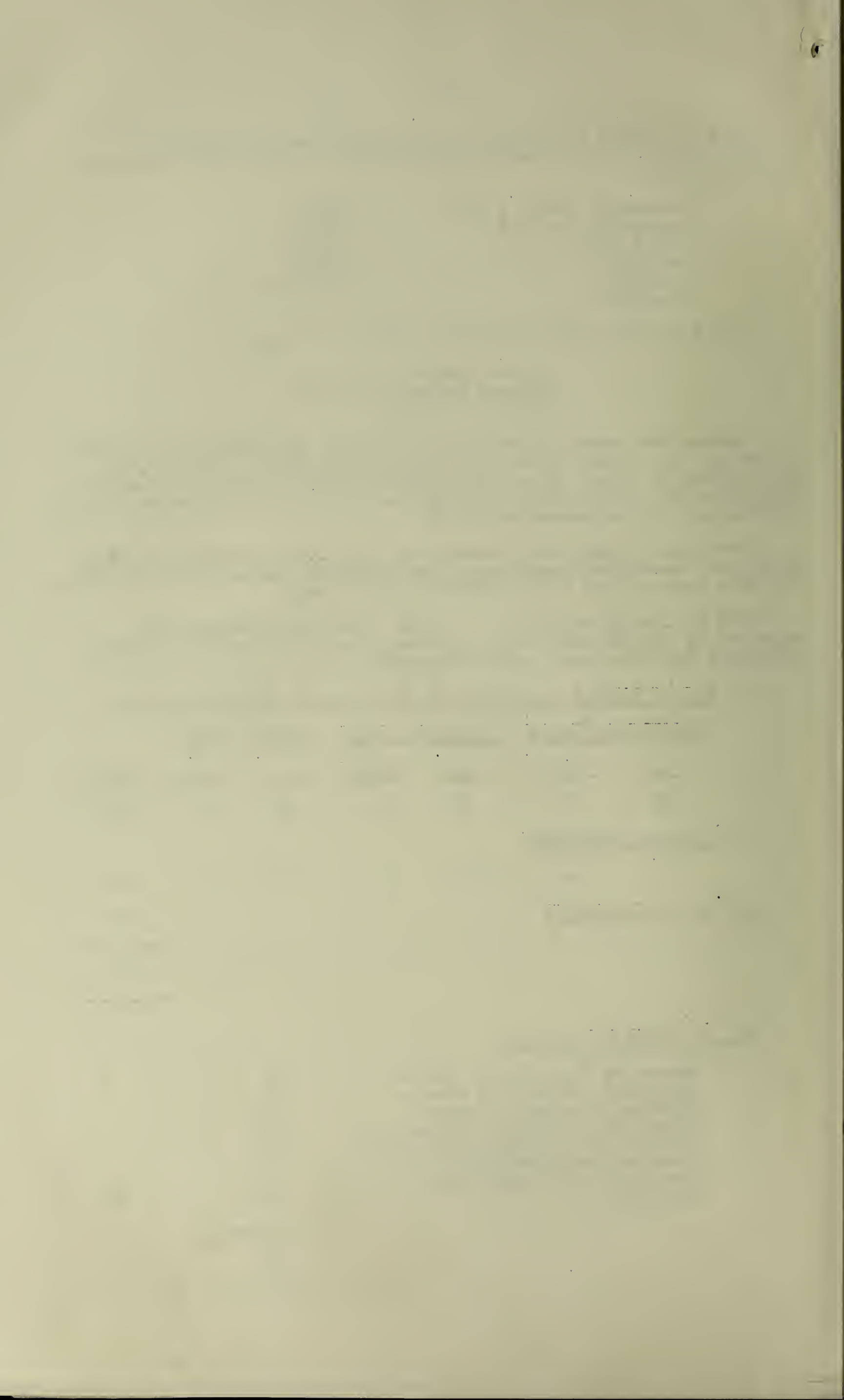
The following analysis of births occurring during 1948, adjusted by transferred notifications, indicates how the various maternity services and institutions were used.

1. No. of births occurring in the Borough during the year

<u>Domiciliary Cases</u>		<u>Northgate Lodge</u>		<u>Nursing Home</u>		<u>TOTAL</u>
<u>L.</u>	<u>S.B.</u>	<u>L.</u>	<u>S.B.</u>	<u>L.</u>	<u>S.B.</u>	
295	8	37	-	107	1	448
2. <u>Outward Transfers</u>						
-	-	25	-	71	-	96
3. <u>Inward Transfers</u>						
						130
						482

No. of Inward Transfers

Maternity Hospital at Leeds	26
Castleford Maternity Home	6
Wakefield General Hospital	9
Walton Hall Maternity Home	57
Hazlewood Castle Maternity Home	24
Four Gables Maternity Home	1
Brentwood Maternity Home, Essex	1
Relations	6
	130





### Nursery Provision for Children under 5

The Crèche at Beechwood Bungalow was open four sessions per week during the year, the average attendance per session being 15. Provision is made here for toddlers only.

### Care of Premature Infants

18 premature infants were notified during the year. In each case a special investigation was made, and help given as required. In hospital cases there was close liaison between hospitals and Authorities.

## P A R T   F O U R

### SCHOOL MEDICAL SERVICES

Routine school medical inspections were carried out in the Pontefract schools during the year.

It was felt to be desirable to institute a clinic session for consultation with the School Medical Officer, at which parents could attend. This was done, and the demand for this service has increased rapidly until now the average attendance per session numbers 70 school children, and the sessions are running up to five hours.

Specialist consultations for orthopaedic cases (held twice monthly), Ear, Nose and Throat cases (held fortnightly) and ophthalmic cases (held fortnightly) were also carried out. The demand for all these is great and the number of cases difficult to cope with.

Minor Ailments Clinics, in the charge of the school nurse, were held daily. An average of 40 school children per day attend these sessions.

## P A R T   F I V E

### HOME NURSING

The number of home nurses was increased from one to two during the year, and there has been considerable demand for their services. At the present time these two nurses between them are carrying out about 115 visits weekly.

## P A R T   S I X

### CARE AND AFTER-CARE

Good liaison has been established between the Health Department and the principal hospitals in Leeds and Wakefield. The case histories of all patients discharged are sent to this office and the cases are followed up by the Health Visitors, all possible help being given. Liaison is not yet satisfactory with the Pontefract Infirmary but it is expected that an Almoner will be appointed to this institution in the near future which should make matters easier.

1. The first part of the paper is devoted to a general

discussion of the problem and the methods used in the

present study. It is shown that the problem is

of great importance and that the methods used are

very simple and

very effective.

The results of the study are

presented in the following sections. It is shown that

the results are in good agreement with the

theoretical predictions and that the

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### Home Helps

The Home Help Service was among those transferred to the County Council on the 5th July.

The demand for this service has been considerable and is increasing steadily. On the 31st December there were four home helps available in Pontefract.

## P A R T   S E V E N

### MENTAL HEALTH

Mental health is now a responsibility of a Sub-Committee of the County Council. Work under the Lunacy and Mental Treatment Acts, 1890 to 1930 has been undertaken by a Duly Authorised Officer living in Pontefract, and we have had one Mental Deficiency Social Worker, Miss Simons, for work under the Mental Deficiency Acts. Most of the work concerned with the guardianship, supervision and training of mental defectives has fallen to her, and the way she has carried out her duties, which require a high degree of tact and sympathy, merits special tribute.

## P A R T   E I G H T

### AMBULANCE SERVICES

The Ambulance Service of the Borough is now operated on an agency basis on behalf of the County Council, and its administration is the responsibility of the County Ambulance Officer.

The call on this service has been exceedingly heavy and has increased greatly as a result of the National Health Service Act, 1946, coming into operation. It is to be hoped that in the near future an additional vehicle and driver will be provided for the area.

## P A R T   N I N E

### FOOD POISONING OUTBREAKS

The following gives details of food poisoning cases notified under the Food and Drugs Act, 1948.

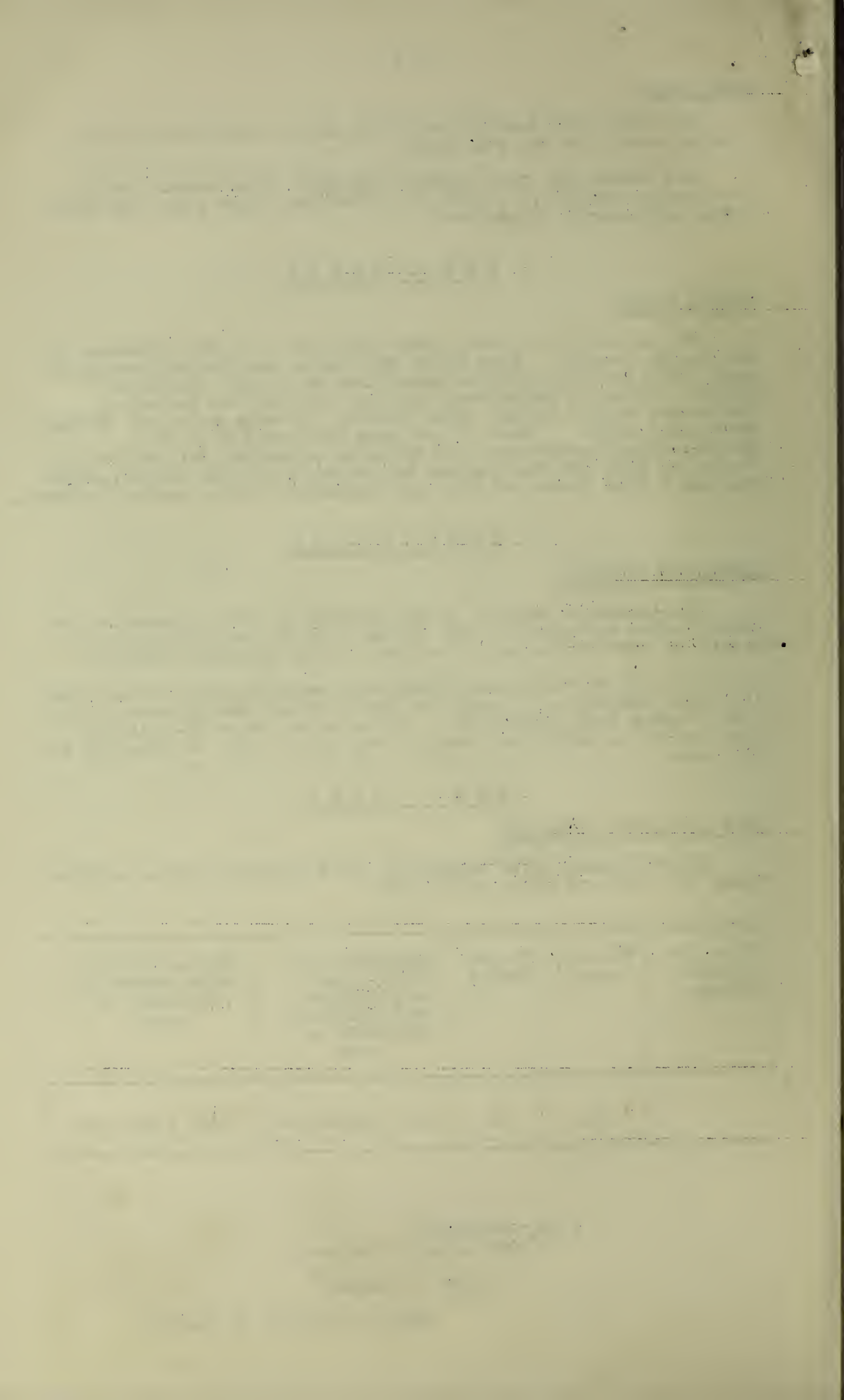
Total No. of out-breaks	No. of cases	No. of deaths	Organisms or other agents responsible with number of outbreaks of each	Foods involved with number of outbreaks of each
1	15	0	Not identified	Not identified

I am, Gentlemen,  
Your obedient Servant,

JOHN F. FRASER

Medical Officer of Health.





## BOROUGH OF PONTEFRAC

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Annual Report of the Chief Sanitary Inspector  
for the year ended 31st December, 1948.

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To the Chairman and Members of the Health Committee,  
and the Medical Officer of Health.

Gentlemen,

I have pleasure in presenting to you this my Eleventh Annual Report on Sanitary Administration in the Borough. The subject matter of the Report is dealt with under the following headings:-

1. Sanitary Circumstances.
  - (1) Water Supplies.
  - (2) Swimming Baths: Sanitary Condition of Water.
  - (3) General Sanitation and Abatement of Nuisances.
  - (4) Atmospheric Pollution.
  - (5) Welfare of Workers in Factories, Workplaces and Shops.
  - (6) Rodent Control.
2. Housing.
  - (1) General Conditions and Overcrowding.
  - (2) Inspection, Repair and Clearance of Unfit Houses.
  - (3) Eradication of Verminous Conditions.
3. Food and Food Processes.
  - (1) Meat Supply: Preparation and Sale.
  - (2) Milk Supply: Production and Sale.
  - (3) Ice-Cream: Manufacture and Sale.
  - (4) Other Foods.
  - (5) Food Premises: Supervision and Control.
4. Summarised Statement of Inspections made and Notices served.
  - (1) Nature and number of Inspections made.
  - (2) Number of Notices served, and Results.

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PART ONE

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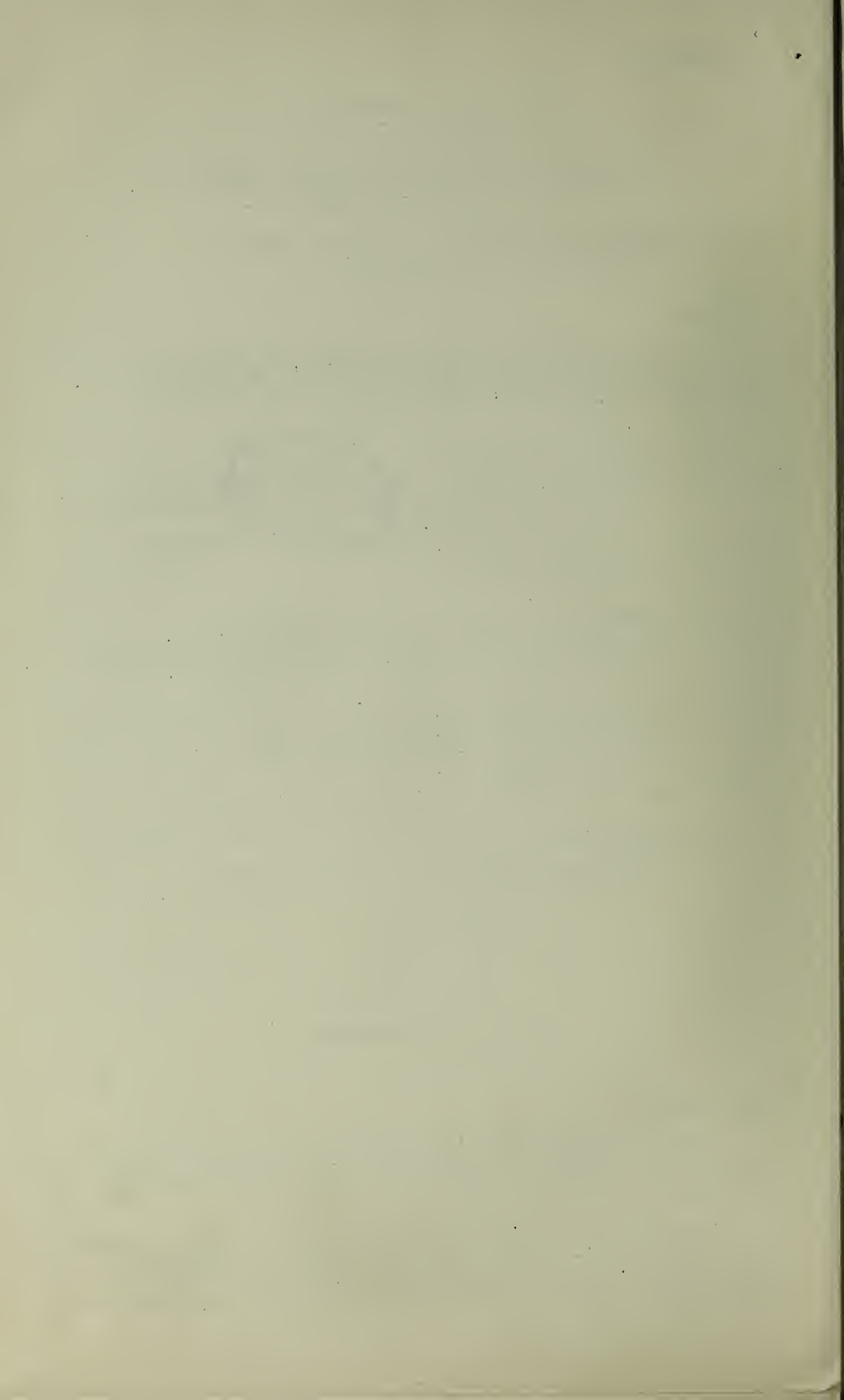
SANITARY CIRCUMSTANCES

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Water Supply

A sufficient and constant supply of wholesome water was distributed throughout the district by the Corporation during the year, the supply for domestic use being of the order of 27 gallons per head per day.

The supply was sampled regularly for both chemical analysis and bacteriological examination. 66 samples of chlorinated water going into supply were submitted to bacteriological examination; 65 were reported upon as Class I waters and one fell into Class 2.





Thirty-two samples of raw waters taken from source were classified as follows:

Source of raw water	No. of Samples falling into the Classes named:				Total Samples taken
	Class 1	Class 2	Class 3	Class 4	
Roall	10	-	-	-	10
Eggborough	10	2*	-	-	12
Tanshelf	10	-	-	-	10

\* Classes 1 and 2 indicate satisfactory waters.

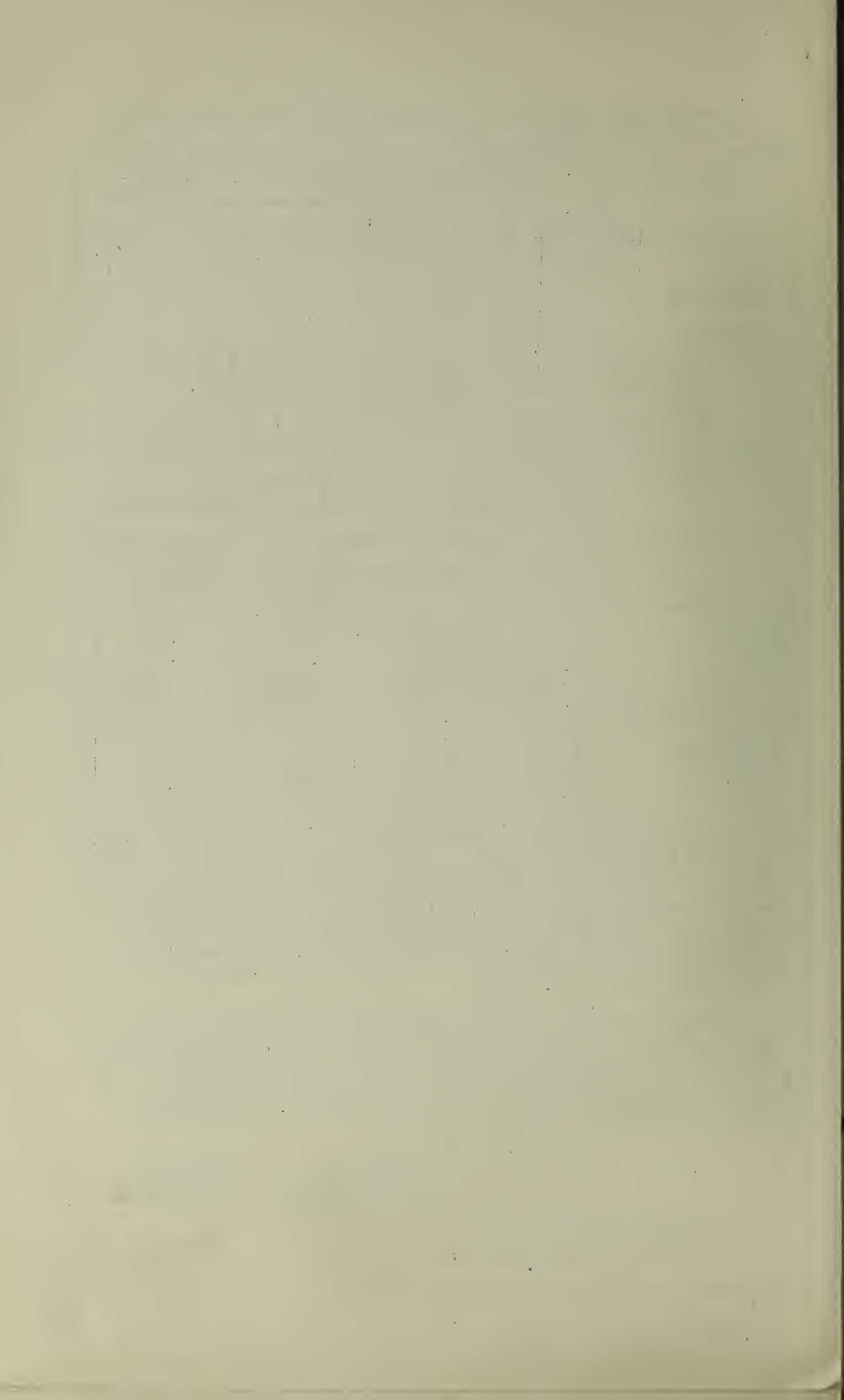
Twenty-three samples (including at least 5 taken direct from each source) were submitted to chemical analysis, and the following Table gives typical results:

Parts per 100,000 -	Results of Analysis of Samples taken -			
	At source of supply			From service pipe (mixed supply)
	Roall	Eggborough	Tanshelf	
Total solids	40.0	27.0	98.0	36.0
Chloride	2.7	1.8	5.5	3.0
Nitrite	-	-	-	-
Nitrate	0.35	0.21	1.05	0.27
Free ammonia	0.002	0.002	0.002	0.002
Albuminoid ammonia	0.002	0.002	0.002	0.002
Poisonous metals	-	-	-	-
Hardness:				
Permanent	7.2	2.2	37.4	10.0
Temporary	16.0	12.0	26.6	17.0
Total	23.2	14.2	64.0	27.0

These chemical data indicate waters of good organic quality. Tanshelf water is very hard: during 1948 it constituted only 4% of the total water supply, but its effect on samples of mixed water was appreciable, the total hardness of these samples varying between 23 and 30. It is anticipated that this auxiliary source will be no longer used when the New Works are completed at Heck. None of the Corporation's waters is plumbo-solvent. The pH values of the mixed supply have ranged from 7.0 to 7.4.

Only one house in the Borough is not connected to the public supply. These premises are away from the Corporation's main, and are served by a private well. Only four houses in the Borough are served by outside stand-pipes, and these properties are scheduled for clearance under the provisions of the Housing Act, 1936. The position may be tabulated as follows:

	<u>No. of dwellinghouses</u>	<u>Estimated Population</u>
(1) Supplied from public main:		
(a) Direct to houses	5,981	22,415
(b) By means of stand-pipes	4	12
(2) Supplied from private source	1	.3



### Swimming Baths. Sanitary Condition of Water.

The waters of the Public Swimming Baths, if not kept at a high standard of bacteriological purity, might readily become a medium for the spread of infection. Throughout the season, therefore, a weekly sample of water was taken from the large swim, and in all but two cases bacteriological condition was highly satisfactory, the samples falling into the category of Class I waters. The late arrival of chlorine cylinders on one occasion resulted in a temporary lowering of this standard and the Baths were closed for a short period on this account.

A weekly sample was also submitted to chemical examination for 'free chlorine content' and 'pH value'. The Ministry's Standard for free chlorine is between 0.2 and 0.5 parts per million; but since this was stepped up in August, 1947, to a minimum of 0.5 as a precautionary measure against the spread of acute poliomyelitis, a higher chlorine content has been maintained. 25% of the samples taken for 'free chlorine' failed to reach the official standard of 0.2 parts per million. The corresponding percentages for 1947 and 1946 were 36% and 47% respectively. pH values should fall within the limits 7.6 to 8.0; during the season they ranged from 6.6 to 8.3, and 45% of the samples examined reached at least the official minimum of 7.6 as against 14% in 1947 and 36% in 1946.

No undue significance is claimed for these figures but the trend shown is satisfactory.

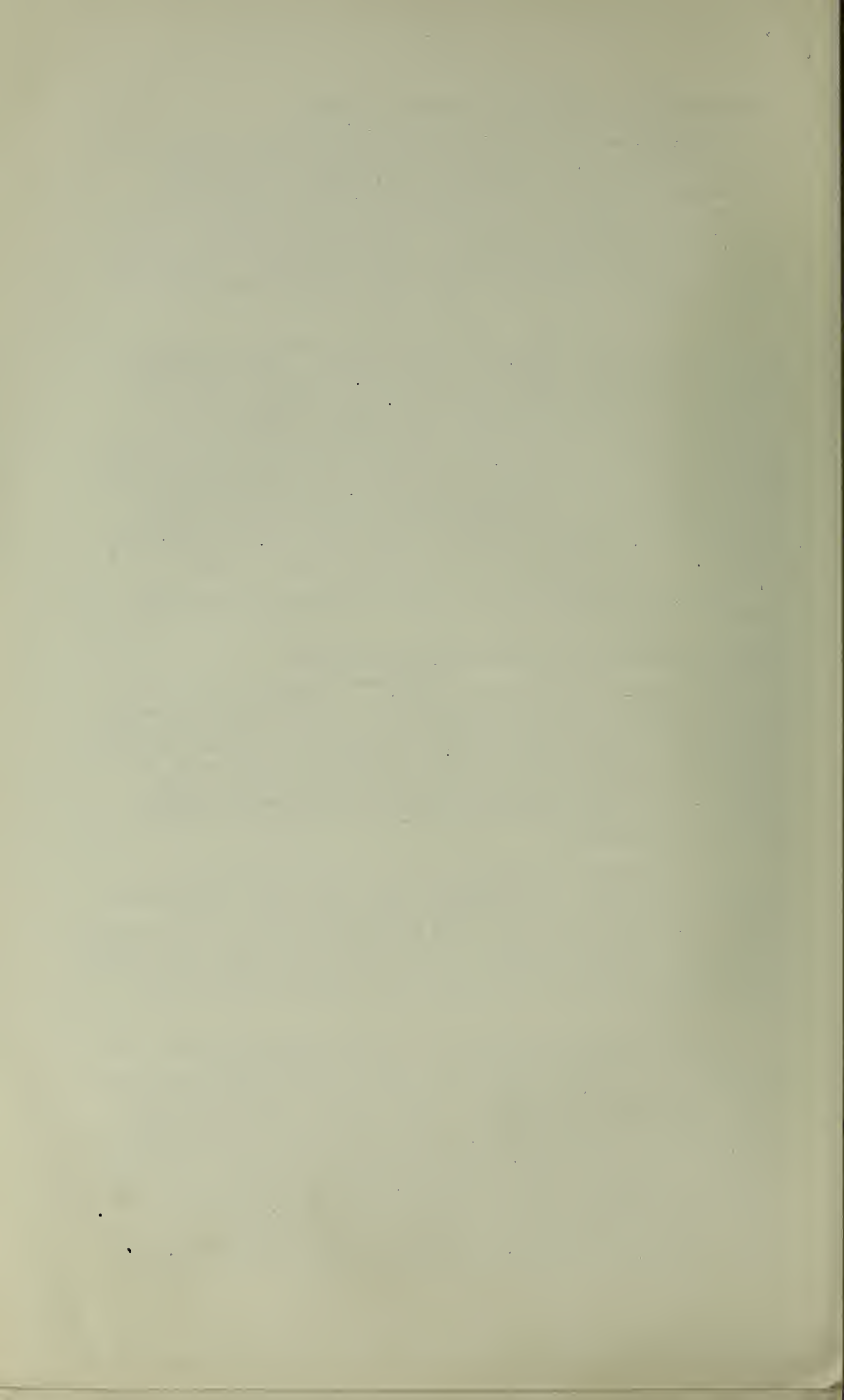
### General Sanitation and Abatement of Nuisances.

All built-up areas in the Borough are sewered, and only 37 houses are not connected to sewers. 99.7% of the closets are on the water-carriage system; only 11 of the privy-midden type remain; these being isolated cases where a sewer is not available. Whilst there is little room for improvement in type, the maintenance of existing accommodation at a high level of efficiency is a matter which is receiving constant attention, and it is considered that a reasonable standard has been maintained.

A considerable amount of drainage work has been done, although plans for many desirable but less urgent improvements have been postponed until a more appropriate time. The lack of adequate means of access for the inspection and cleansing of drainage systems at some of the older properties in the town continues to present difficulties; but again, this matter must wait until systematic street-by-street improvements become practicable.

So far as is known there are no dry-ashpits in use; all properties are served with metal dustbins of approved specification. The Council have not used the power given by the Public Health Act, 1936, to inaugurate a scheme for the public ownership of dustbins. The provision and maintenance of an adequate bin at every domestic building in the Borough is essential to the health of the community, and it is considered that the position in this respect was never better. Too many occupiers, however, deposit in household dustbins, vegetable refuse and offensive material which would be better burnt if not of animal food value. Attention to this matter and the proper use of dustbins would help in several directions: it would save money, provide more animal feeding stuffs, extend





the life of dustbins, and make the necessary job of collection a less offensive operation. Too much publicity cannot be given to this.

272 nuisances (including 'statutory nuisances' and other insanitary conditions referred to in the Public Health Act as 'nuisances') were found during the year, and 77 outstanding from 1946 gave a total of 349 needing abatement. (These figures do not include housing defects dealt with under the Housing Act.) 309 of these had been abated by the end of the year. The numbers of inspections made and notices served during the year together with the results are included in Part 4 of this Report. Unsatisfactory conditions dealt with under the Public Health Act may normally be considered more urgent than those dealt with under the Housing Acts, and most owners responded readily to notices served. As the year wore on it became less difficult to obtain the services of contractors, and owners were able to meet the Corporation's requirements with much less delay than has been the case in recent years.

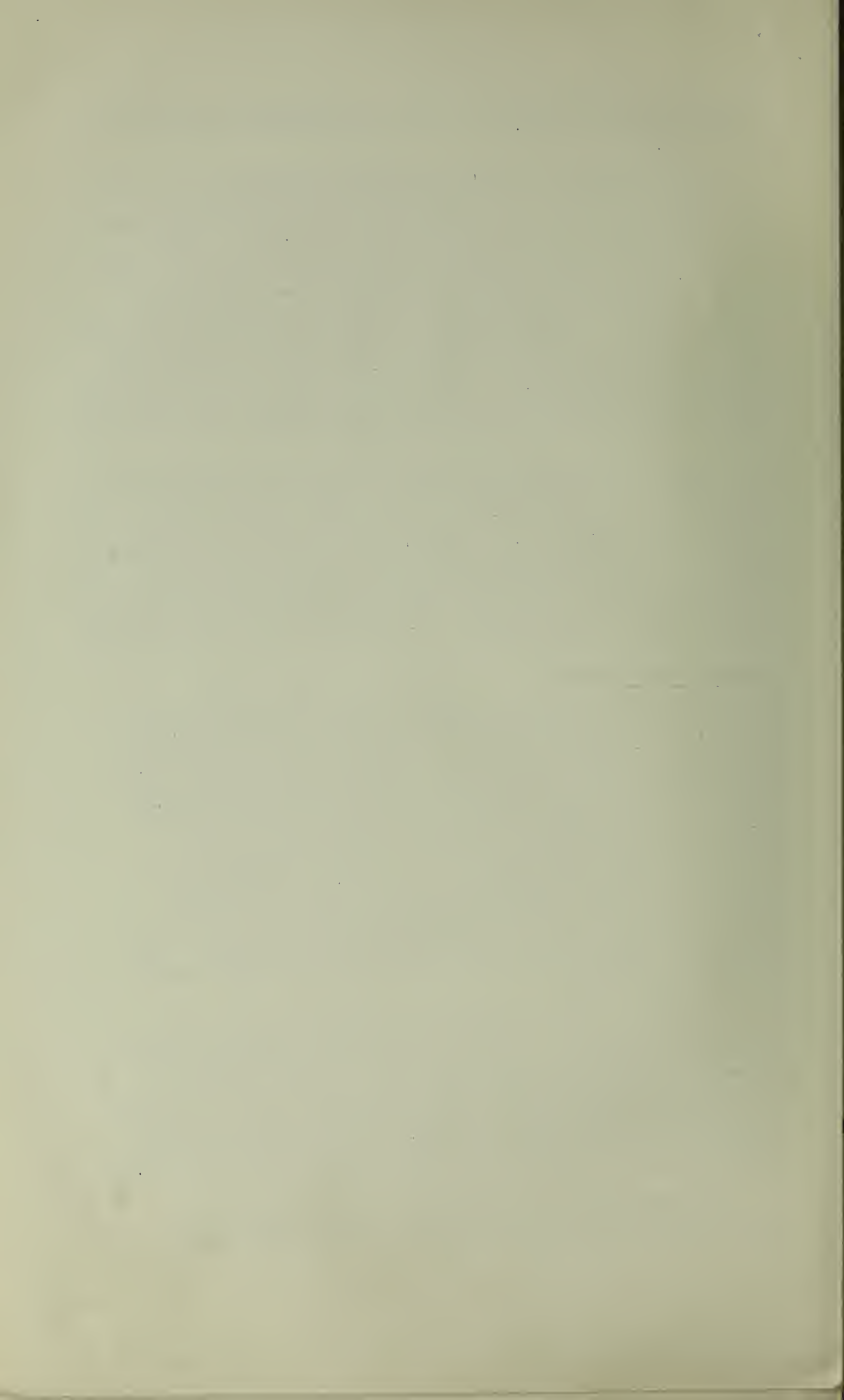
Six trades scheduled in section 107 of the Public Health Act, 1936, as 'Offensive Trades' were carried on in the Borough during the year under review. These were conducted in a satisfactory manner. One factory processing kitchen waste (a trade not scheduled as 'offensive') gave rise to considerable nuisance due to the emission from time to time of noxious effluvia. Although this nuisance was largely abated following the installation of new plant, there was still occasional nuisance due to the condition in which some of the raw material was delivered to the factory.

#### Atmospheric Pollution

The problem of smoke abatement may be considered under two heads: (1) Industrial smoke, and (2) Domestic smoke. So far as industrial smoke is concerned I am of opinion that in general, conditions have been better than in recent years. Smoke nuisances have undoubtedly occurred from time to time, but of 61 formal smoke observations, each of thirty minutes duration, only 4 showed emission in excess of the limit of two minutes black smoke within the observation period. Numerous casual observations were followed by inspections of boiler plant and cautions to attendants. With one exception, at which existing plant is unable to meet the peak loads of a recently extended factory, any violation of the byelaw in force in the Borough may be taken to be the result of a lapse on the part of the boiler attendant. At the premises referred to as an exception, new boiler plant is to be installed.

I am not a little concerned about the domestic smoke problem. There is no law to deal with the domestic offender, and it may be said that in these days of coal-rationing the domestic consumer has little chance to commit an offence. A large section of our community, however, have 'coal to burn' and inevitably they send a considerable part of it, unconsumed, out into the air we have to breathe. The solution of this problem goes much further than Public Health and in the present report one can do no more than hope a solution will be found.

The Corporation are interested in the wider aspects of the smoke problem, and under the powers conferred by section 105 of the Public Health Act, 1936, have participated





in the investigation of problems related to atmospheric pollution. Standard deposit gauge and lead-peroxide apparatus for the measurement of sulphur dioxide have been exposed throughout the year, and results have been forwarded to the Department of Scientific and Industrial Research, the central organisation responsible for bringing together the records of the many co-operating authorities. Continuous deposit gauge data are available from January, 1946, and it may be that a longer period of observation is necessary before a reasonably reliable picture of the atmospheric conditions in the Borough can be presented and discussed in an annual report; it may be said, however, that the total deposit collected represents a deposit of 200 tons per square mile per annum: an authority on the subject has stated that conditions may be considered to be 'bad' when the deposit exceeds 250 tons.

The total deposit in the year ended June, 1940, and in the years 1947-8 provide an interesting comparison.

Period	Total Deposit (tons per square mile)	'Tarry' Matter
Twelve months ended:-		
June, 1940	262	5.1
December, 1947	202	3.1
December, 1948	201	4.3

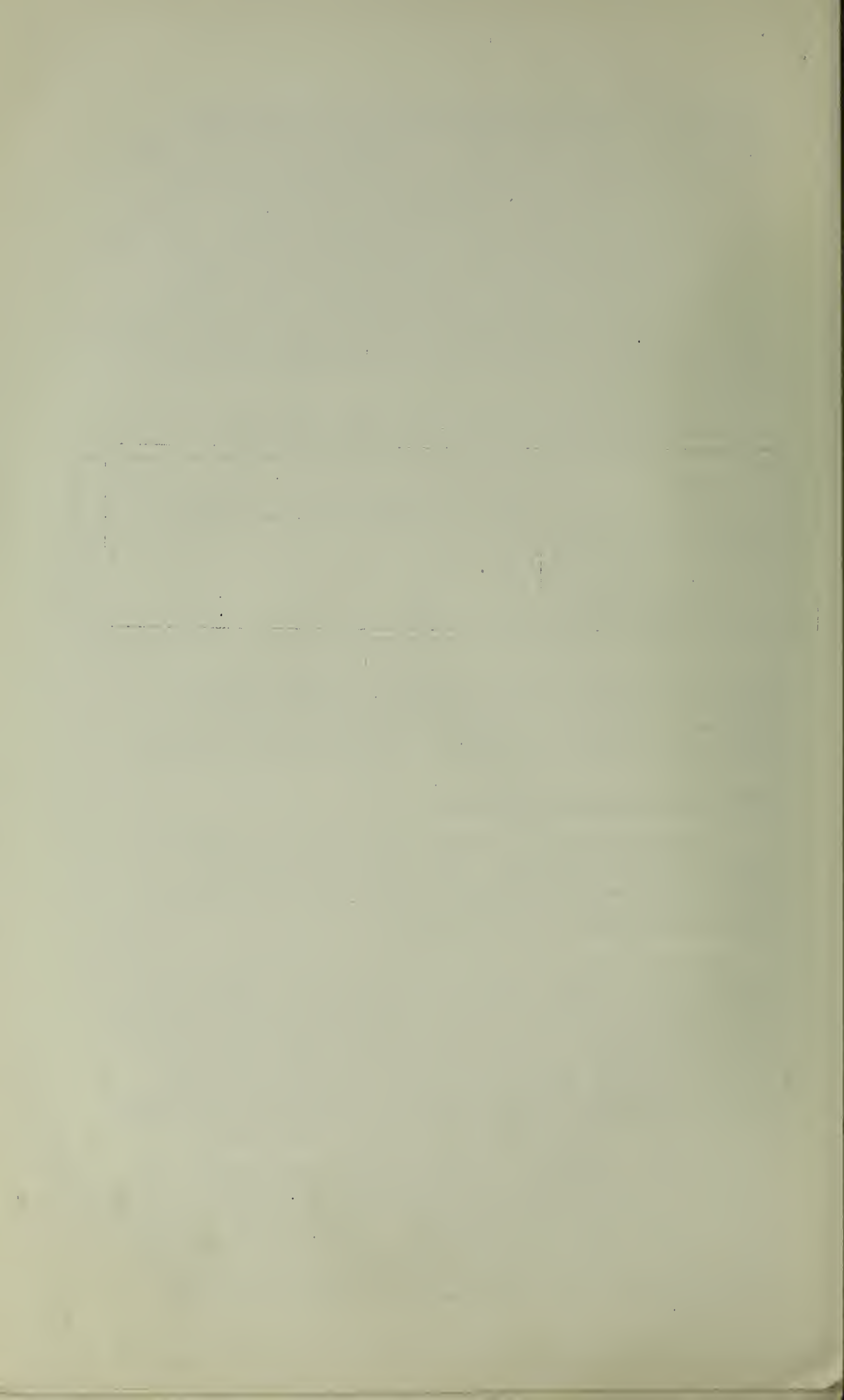
The 1948 increase in 'tarry matter' could indicate increased domestic pollution from the Tanshelf district where considerable quantities of miner's home coal is consumed. It is to be regretted that the public are not yet ready for smoke prevention: smoke abatement follows far behind as a second best.

#### Factories, Workplaces and Shops.

Arrangements for the health and comfort of workers in their places of employment have again been given their due attention during the year. The routine inspection of factories and shops has been continued, and on no occasion has it been necessary to resort to statutory power to secure improvements found to be necessary.

The term 'factory' as used in the Factories Act, 1937, includes all premises where articles are made, altered or repaired for purposes of gain. There are 99 such premises on the Factory Register, at 84 of which mechanical power is used. 80 inspections were made during 1948; in 19 cases defects were found, and 19 were remedied during the year. The provisions of section 34 of the Factories Act, 1937, relating to means of escape in case of fire are administered by this Department. Two certificates of fitness were issued and nine were amended during the course of the year.

The term 'workplace' as used in the Public Health Act, 1936, embraces offices, restaurant kitchens and most other premises in which persons are employed; but excludes domestic premises, factories and (except for 'overcrowding' purposes) shops to which the Shops Act, 1934, applies. The routine inspection of offices was not practicable during 1948, but where unsatisfactory conditions came to my notice in the course of other duties, the requisite remedial measures were taken.



The term 'shop' includes warehouses used in connection with wholesale or retail trade, refreshment houses, lending libraries and hairdressing establishments. There are 378 shop premises on the Register, and the Shops Act, 1934 applies to 234 of these. 166 visits for the investigation of welfare arrangements were made in 1948. In the case of food premises the work was done parallel with Food and Drugs Act inspections, referred to later in this Report.

### Rodent Control

The Corporation continued to prosecute their duties under the Rats and Mice (Destruction) Act, 1919, and the Infestation Order, 1943, with the object of minimising, if not clearing, rodent infestation in their area. Pontefract is an old Borough which offers a maximum potential harbourage for rats; furthermore, the town is at the centre of a considerable belt of agricultural land: it is not surprising, therefore, that a complete clearance has not been affected. It can be said, however, that the position at the end of 1948 was an improvement on that of a year ago.

The fact that Pontefract attempts total clearance in given areas is reflected in the number of infestations shown to have received multiple treatment (see following Table), whilst the high percentage of infestations found by the Corporation (60%) compared with the total number treated is considered to indicate a positive approach to total clearance, as opposed to treatment only upon complaint.

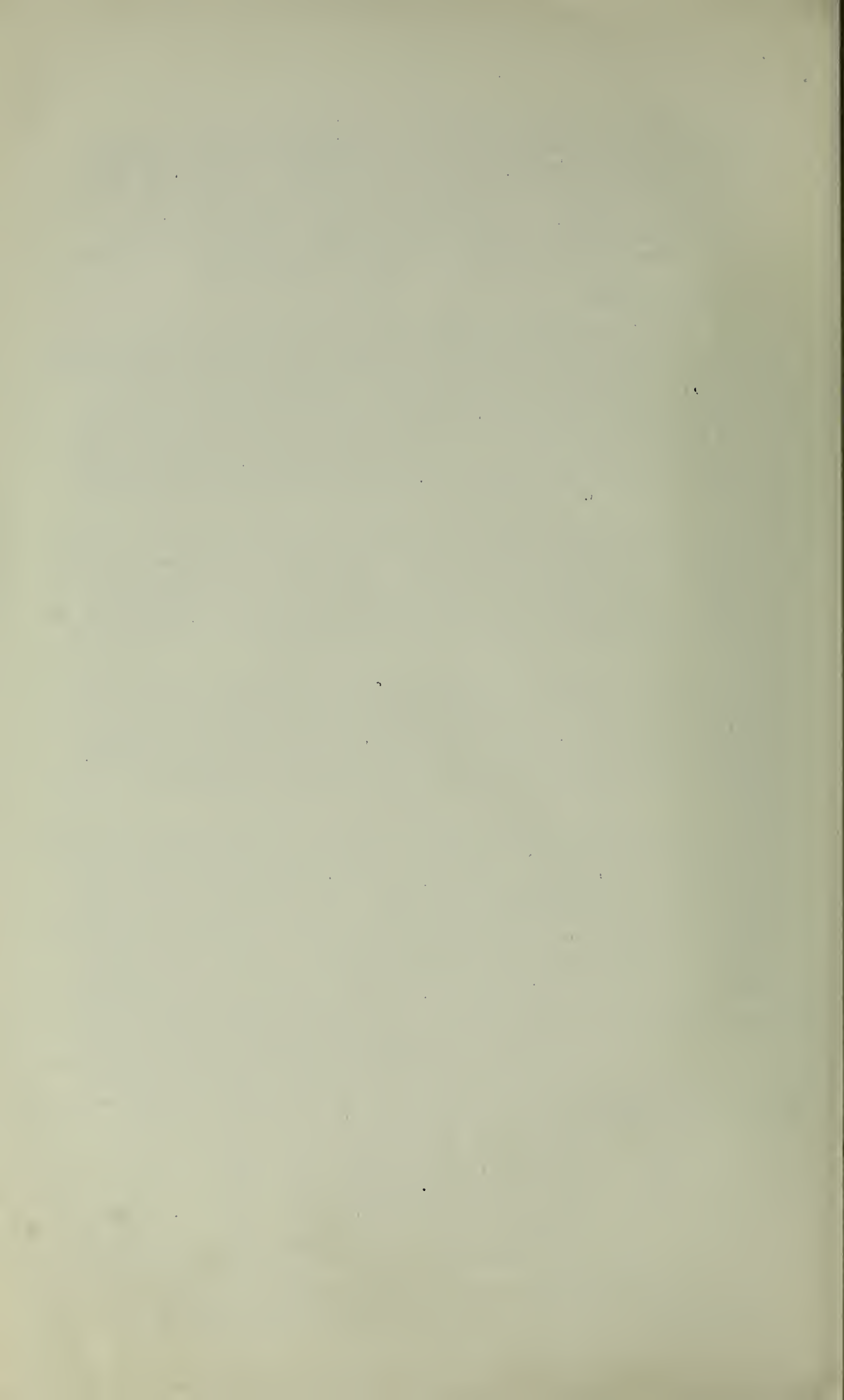
The Corporation employed two operatives until July, when the senior operative left their service. In view of the imminence of new legislation on the subject of rodent control the post has been left vacant until the new set-up is known. Every endeavour was made to keep Corporation properties free from infestation, tips, sewers and premises particularly liable to infestation receiving special attention.

The essence of effective work being the systematic discovery and elimination of rat colonies, rather than the treatment of isolated infestations, it was in this direction that the work continued to develop. The Table gives the number and degree of surface infestations dealt with. It should be pointed out that the term 'Treatment' used in the Table comprises prebaiting with unpoisoned bait on four successive days, removing excess poison on the sixth day, and post-baiting on three successive days a fortnight later to test the efficiency of the treatment.

Degree of Infestation	No. of Infestations cleared	No. of these Infestations cleared after 1,2,3 or 4 treatments, respectively				Total No. of treatments given
		1	2	3	4	
Reservoir (rat population of over 200)	4	0	0	1	3	15
Major (20 - 200)	55	10	15	16	14	144
Minor (under 20)	84	32	37	14	1	152
Totals	143	42	52	31	18	311

All occupiers were charged for the disinfection work done on their premises; and full advantage was taken of Grant-Aid.





The Corporation is a member of the Rodent Control Planning and Advisory Committee (Group No.11) which comprises representatives of several local authorities in this area, and whose functions are to secure, in connection with rodent control, adequate co-ordination and uniformity of activity throughout the area served. This Committee has had six meetings during the period under review and useful work has been done. Two items of particular interest were discussed: Grant-Aid and the Prevention of Damage by Pests Bill. The legal powers to provide and maintain an adequate service, and the financial resources at our disposal to pay for it, are the two factors essential to efficiency. The Committee are watching developments in these directions.

## PART TWO

### HOUSING

#### General Conditions and Overcrowding.

Post-war house building had recommenced during 1946, and by the end of the period under review 470 new houses had been provided. The numbers erected each year are as follows:-

Year	No. of houses erected		
	By the Corporation	By Private Enterprise	Total
1946	66	23	89
1947	158	29	187
1948	169	25	194
Totals	393	77	470

From available records it would appear that the number of families who are wanting Corporation houses and who are at present living in lodgings is about 550, which figure may reasonably be taken to represent numerically at 31st December, 1948, the immediate housing need of the people of the Borough. There are some 220 houses in course of construction, or about to be erected under existing schemes; assuming these to be occupied by December, 1949, there would still be not less than 300 families without separate accommodation at that date; and that figure does not include for couples married during 1949.

The Corporation's Scheme for the Selection of Tenants recognises 'need' as the only grounds for rehousing, and no less than 145 houses (88% of total lettings) were let to families who were living in various degrees of overcrowding. In 12 cases statutory overcrowding was abated by Corporation rehousing, bringing the total number of such cases abated in this way since post war building began, to 143. Statutory overcrowding statistics for the past three years are as follows:-





No. of Cases -	Year		
	1946	1947	1948
On register at beginning of year	90	82	13
Added to register during the year	73	13	75
Abated during the year:			
By Corporation rehousing	65	66	12
By other means	16	16	30
Total	81	82	42
On register at end of year	82	13	46

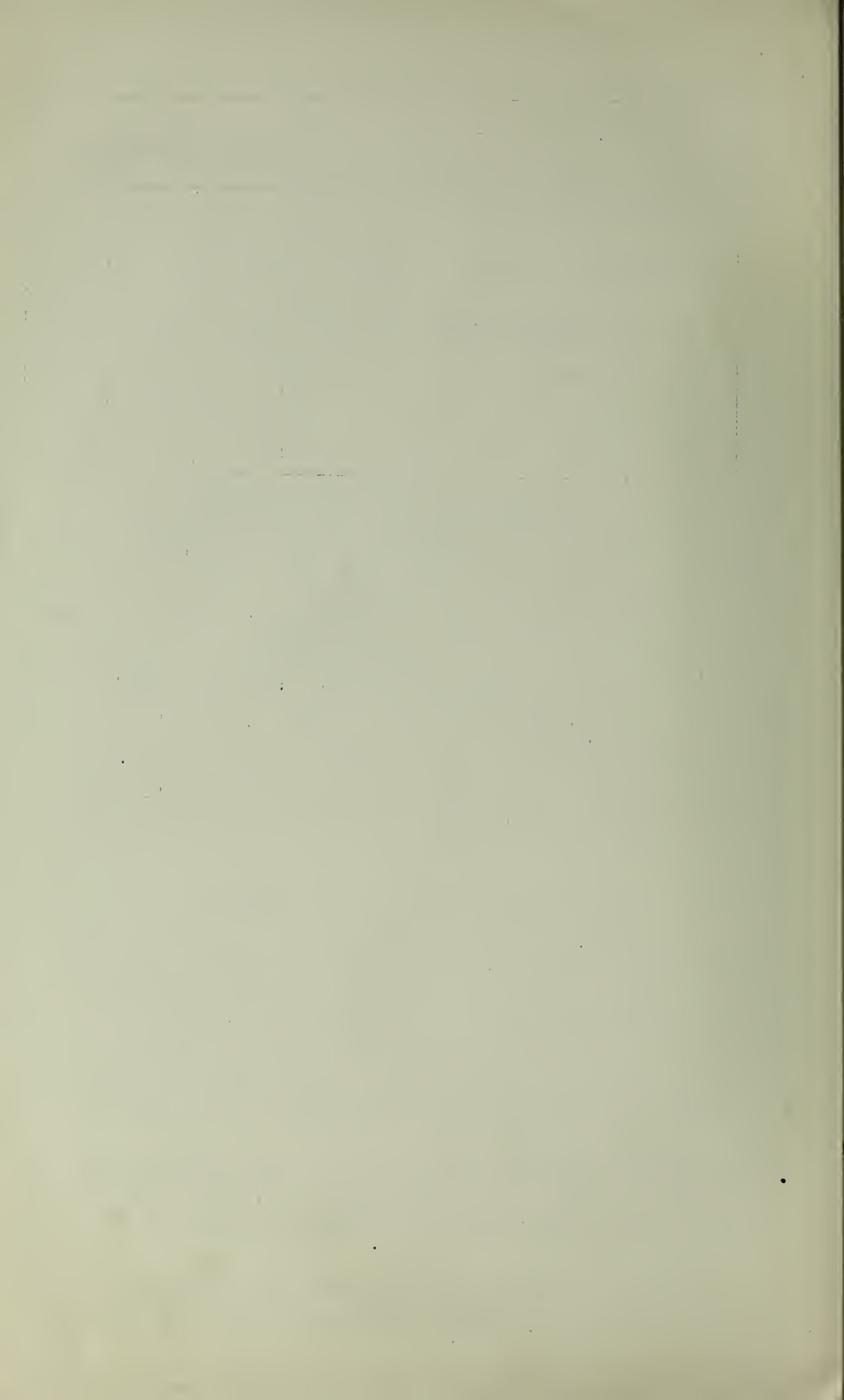
The legal standard of overcrowding is recognised as a low one, and when such cases have been dealt with there remain cases of 'near overcrowding' which are in urgent need of rehousing. The Council have adopted a 'bedroom standard' of overcrowding to deal with these cases; it takes sex-segregation into consideration, and 135 cases were rehoused during the year under review. The fact that so many cases of this type were rehoused while cases of statutory overcrowding remained undealt with was due to the introduction of an 'age of application' qualification into the Scheme for the Selection of Tenants: this was introduced to prevent exploitation of the overcrowding qualification, and no doubt served a useful purpose. The 'age of application' qualification was, however, removed towards the end of 1948, but not in time to allow for the abatement, before the end of the year, of cases of statutory overcrowding included in what became known as 'the Second Phase'; hence the comparatively large number of cases of overcrowding still on the register at the end of 1948. The next Annual Report should show a great improvement.

#### Inspection, Repair and Clearance of Unfit Houses.

For several years the house-to-house inspection envisaged by the Housing Act, 1936, has not been practicable: the limited amount of labour and materials available for maintenance work on existing houses made it possible only to deal with the more urgent defective housing conditions. The Department, in housing repair matters, therefore, continued to deal with defects after complaint, or where a visit to the premises for some other purpose revealed an urgent need for housing repairs. Towards the close of the year both the labour and the materials position improved, and there is every indication that 1949 should show substantial improvement in housing conditions.

During 1948 works were carried out, pursuant either to Housing Act or Public Health Act, at some 300 houses, at 132 of which the works were extensive, and a further 100 were in course of repair. Particulars of inspections made and notices served in this connection are given in Part IV of this Report.

During 1948, 13 houses were closed, these being unfit for habitation and not capable of being rendered fit at reasonable cost. The Corporation rehoused the tenants thus



displaced. Of the houses scheduled for clearance but not dealt with before the outbreak of war - it will be recollected that the final batch of 148 was being dealt with in 1939 - only 95 now remain, and it is anticipated that these will be gradually disposed of as the rehousing position allows; unless of course, a resumption of slum clearance on a larger scale becomes practicable before these houses have been dealt with under the 'individual unfit' sections of the Housing Act.

#### Eradication of Verminous Conditions.

The House Management Committee has continued its practice of giving disinfection treatment to furniture which is verminous or likely to be verminous, before allowing otherwise suitable applicants to take up occupation of new accommodation on Corporation Estates. The Corporation's Contractors carry out the removal, and disinfect with hydrogen cyanide before unloading. The tenant contributes towards the removal expenses. 23 such disinfections were done during the year.

### PART THREE

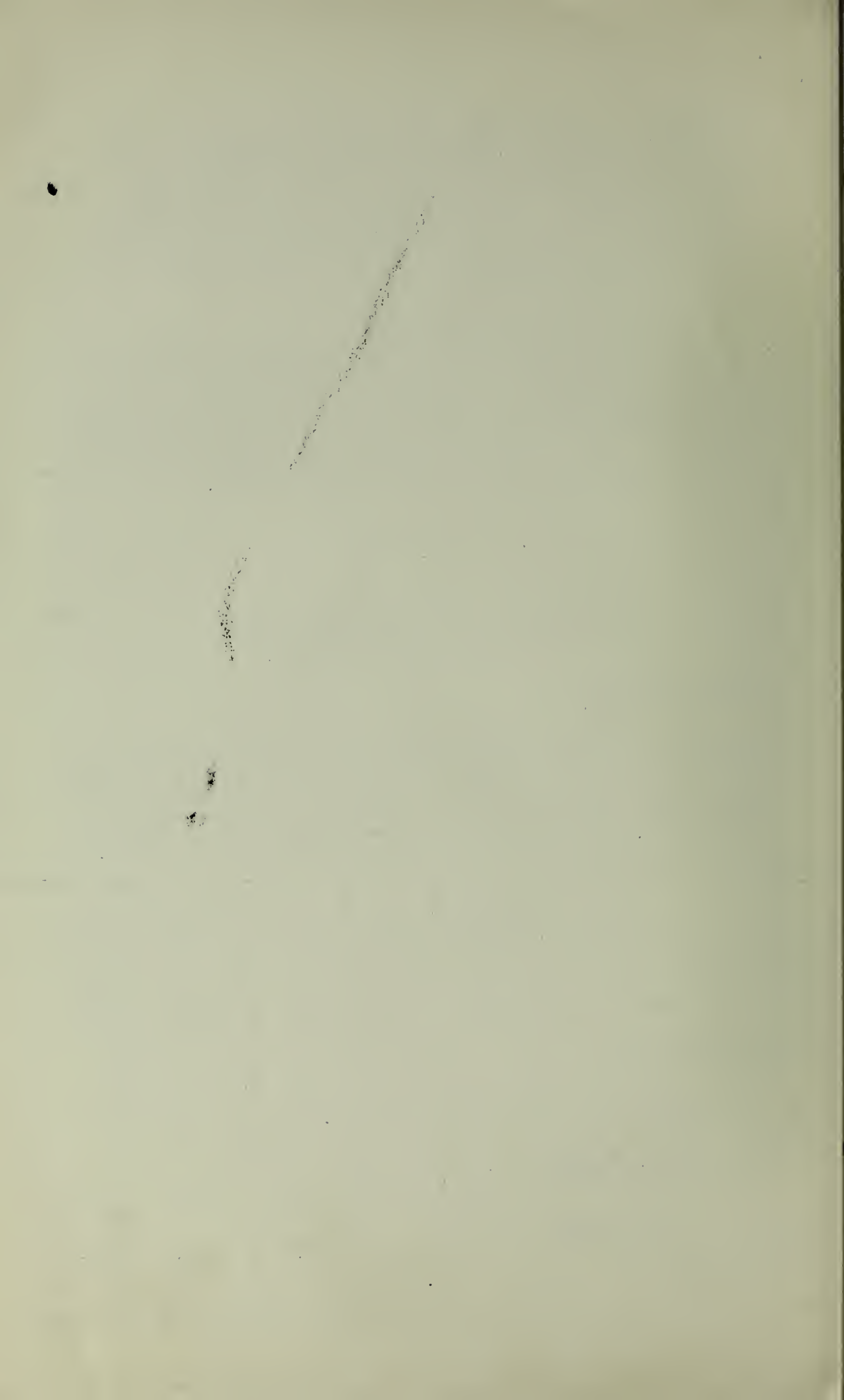
#### INSPECTION AND SUPERVISION OF FOOD.

##### Meat Inspection.

The Ministry of Food continued to use the Abattoir at Newtown as a centre for the preparation of meat for distribution to retailers in the Borough and surrounding districts, covering a population of over 53,000. The whole of the inspection was carried out by Officers of the Department qualified in Meat Inspection. The numbers of animals examined and the numbers in which disease was found are given in the following Table.

	Cattle, excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	1,519	401	997	5,373	178
Number inspected	1,519	401	997	5,373	178
All diseases except Tuberculosis:					
(i) Whole carcasses condemned	1	10	3	7	7
(ii) Carcasses of which some part or organ was condemned	418	87	10	212	45
Percentage of the number inspected affected with disease other than tuberculosis	27.6%	24.2%	1.3%	4.1%	29.2%





	Cattle, excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Tuberculosis Only:					
(iii) Whole carcasses condemned	13	25	1	0	2
(iv) Carcasses of which some part or organ was condemned	245	170	0	0	15
Percentage of the number inspected affected with tuberculosis.	16.9%	48.6%	0.1%	-	9.5%

A total of 69 whole carcasses, 111 part carcasses and 2,796 organs and parts were condemned, the total weight being 24 tons, 4 cwts., 12 lbs. The condemnations classified above as 'other conditions' included bruising, decomposition, dropsy, emaciation, swine erysipelas, fever, septic metritis, septic pericarditis and pyaemia. 'Other conditions' in organs were principally abscesses and parasitic disorders.

From the above Table it will be noted that all animals killed at the Centre were given post-mortem examination. It was not possible to give a similar ante-mortem inspection service; but frequent ante-mortem examinations were made, and the Slaughterhouse Manager co-operated fully by notifying the arrival at the Centre of animals which appeared to be abnormal.

The Abattoir is maintained in a good condition and every facility is given to your Inspectors by the Ministry of Food staff: it will be realised, however, that the premises were not designed to take the large numbers of animals which are sometimes passed through, and inspection difficulties arose from time to time. The Corporation are prepared to erect a Public Abattoir at the earliest possible date; but the matter is in abeyance awaiting the announcement of Government policy on slaughtering.

Transport and handling of meat were given due attention. There were occasional violations of Article 21 of the Public Health (Meat) Regulations, 1924; informal action was sufficient to secure rectification of the conditions complained of. Conditions generally were satisfactory.

#### Milk Supply

The Nation's milk supply is a much debated problem, and it is obvious that the health of dairy herds leaves much to be desired: conditions seen at the Abattoir are often revealing in this respect. It is fortunate that by far the greater part of the milk consumed in the Borough is protected by pasteurisation before it reaches the consumer.

Milk produced locally forms a very small proportion of the total quantity of milk retailed in the Borough. At the present time some 200 dairy cattle are kept by local





farmers, and the bulk of our milk supply comes from sources considerable distances away. The number of registered producers in the area is 11, and there are 60 wholesale traders and 17 retailers. The 14 cowsheds have been inspected at intervals and conditions, generally, were satisfactory. Three producers held 'accredited' licences, and a high standard of cleanliness was maintained at these premises. Samples of ungraded milks from producers and retailers in the Borough have been submitted to the methylene blue test with results reaching or closely approximating to 'accredited' standard: 28 out of 36 such samples actually reached 'accredited' standard.

One licence is in force authorising the use of the designation 'Pasteurised' in relation to milk treated by a pasteurising process at premises in the Borough. The plant, which is of the High-Temperature-Short-Time type, was installed in May, 1946, and satisfies the conditions prescribed by the Milk (Special Designations) Regulations. 45 samples were taken during 1948 for submission to the statutory tests: (1) the phosphatase test, designed to establish that the milk has been adequately heat treated, and (2) the methylene blue test, a test of keeping quality. Only 2 samples failed to reach the required standard.

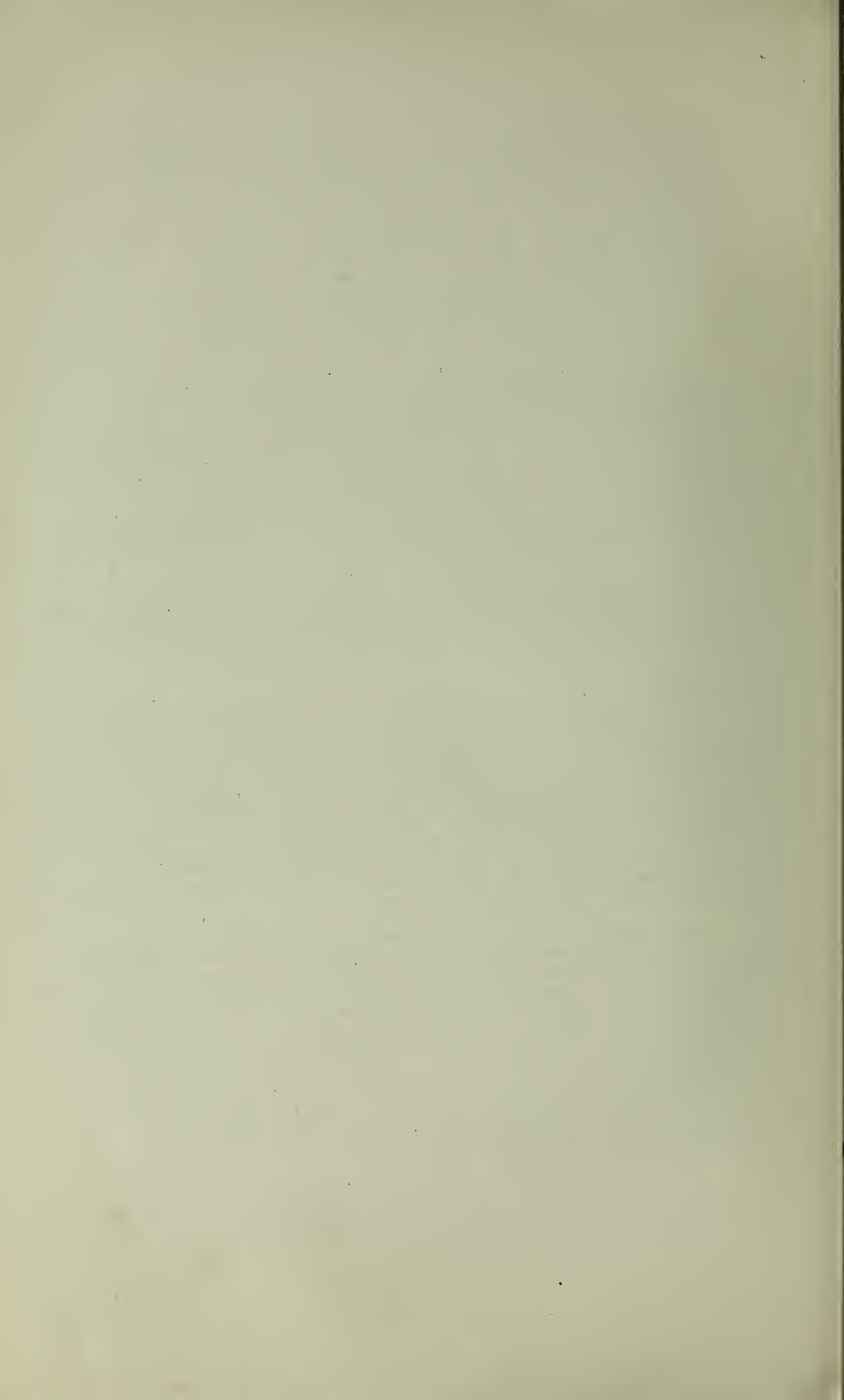
Nine retailers were granted licences authorising the sale of 'Pasteurised' milk and 6 for 'Tuberculin Tested (Pasteurised)'. It is an encouraging sign that the smaller retailers are becoming interested in designated milks.

#### Ice-Cream

The Ice-Cream (Heat Treatment, etc.) Regulations, 1947, which came into operation in May of that year, have enabled the Corporation to make great improvements in the conditions under which ice-cream is manufactured and sold in the Borough. In 1947 the Corporation set down a standard to which all premises used for ice-cream manufacture must conform: during the year under review two persons ceased to manufacture because they could not meet the new requirements. In two cases improvements were made bringing existing premises to the requisite standard, and in one case an existing building was converted into a model factory.

Two further standards were made during 1948: From 1st January vendors of ice-cream in the Borough were informed that ice-cream sold in the open would be considered (for the purpose of the Ice-Cream Regulations) as not protected from contamination unless it had been pre-packed or, alternatively, had been sold from an enclosed sales unit. Secondly, a standard for premises used for the retailing of ice-cream was laid down by the Corporation. These covered the structural condition of premises and other matters affecting hygiene; and the result was a gradual improvement in the conditions under which the commodity was sold. During the year 4 premises were newly registered for the sale of ice-cream, and one application was refused.

There is still no test for the grading of ice-cream which, in the opinion of the Ministry of Health, is satisfactory for use as a statutory test for measuring bacteriological quality. The Committee of the Medical Research



Council appointed to inquire into this matter, issued a Second Report during the year in which they recommended that throughout the year the following standard should be maintained:

50% of samples should fall into Grade 1;  
80% should not fall below Grade 2;  
Not more than 20% should fall into Grade 3; and  
None should fall into Grade 4.

So far as the 47 samples taken in the Borough are concerned:

70% of samples fell into Grade 1;  
83% fell into Grades 1 and 2;  
13% fell into Grade 3; and  
2 samples were reported Grade 4.

Neither of these bad samples had an obvious explanation, the hygienic conditions at the factories concerned being satisfactory. In fact, in the case of one of the manufacturers, from whom a total of eleven samples was taken, ten were reported as Grade 1.

The general position is a great improvement on the figures for 1947 which were as follows:-

37% of samples fell into Grade 1;  
63% fell into Grades 1 and 2; and  
37% fell into Grade 3.

### Other Foods

The three commodities already dealt with, being by far the most important from a public health point of view, have been considered at some length; 'other foods', generally speaking, do not warrant the same degree of control, and when in an unsound condition are usually perceptibly so to both vendor and customer.

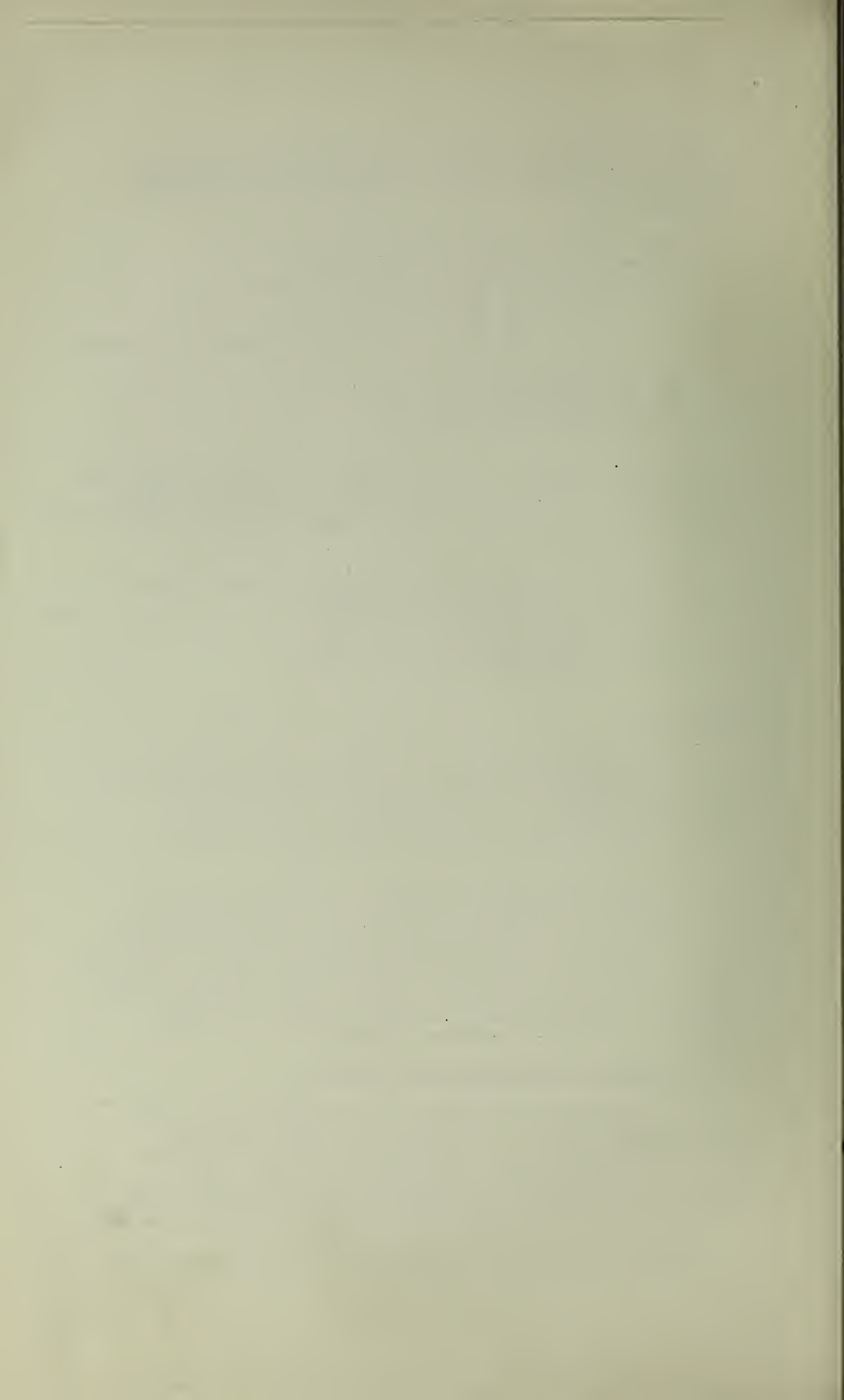
The continued need to prevent wastage of food has again resulted in traders calling in your Inspectors for an opinion on food which prior to the war they themselves would have rejected without official inspection. Regarding rationed goods, the retailer or wholesaler requires the certificate of the local authority's officer before he can dispose of unfit foodstuffs. Food not fit for human consumption has been used, whenever possible and after suitable treatment, for animal feeding.

### Food Premises: Supervision and Control.

Food premises were inspected during the year; any contraventions of Food and Drugs Act, 1938, Milk and Dairies Order, 1926, or Public Health (Meat) Regulations, 1924, were noted, and remedial measures taken. The general condition of food premises was satisfactory, and reference to Part IV of the Report will give some indication of the extent of the Department's activity in this connection.

Section 13 of the Food and Drugs Act, 1938, lays down the principal hygienic conditions to be observed in most





premises where foodstuffs are produced, stored or sold, and a drive to visit all such premises within a comparatively short time was commenced in the Autumn, and continued into 1949. The premises visited included food factories, warehouses and shops, restaurants and cafes, public houses and canteens; and food hygiene was stressed from every angle. Structural defects, lighting, ventilation, together with personal and general food hygiene, were given attention. Generally premises and personnel reached a satisfactory standard: premises were inspected at the same time for Public Health Act defects; these and other defects were remedied largely without recourse to statutory action, and the general attitude of management and personnel in the food trade was co-operative and showed appreciation of the high - not merely satisfactory - standards required.

In accordance with modern trends it is anticipated that this activity in the field of food hygiene will be further intensified.

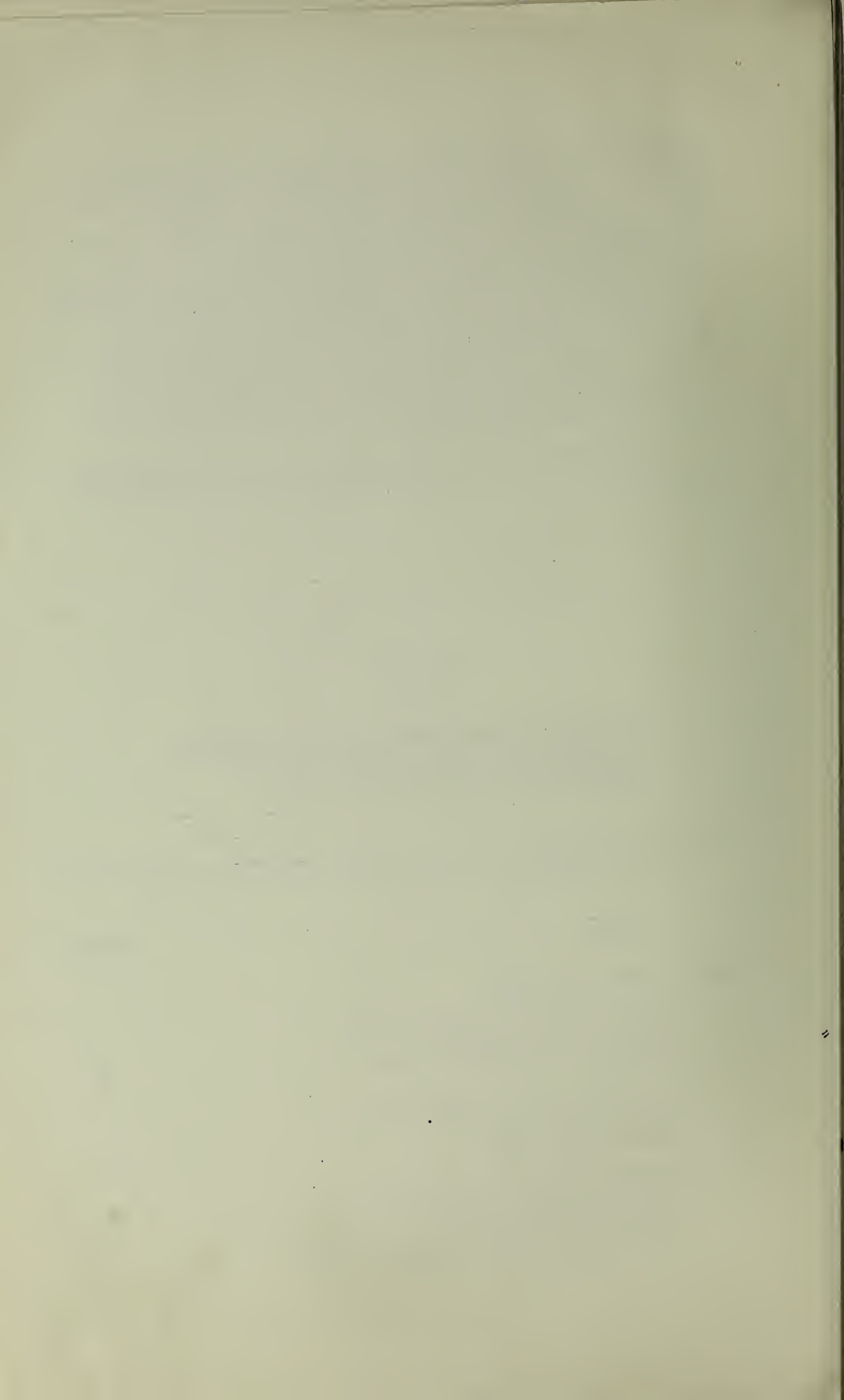
#### PART FOUR

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Statement of Particulars furnished pursuant  
to Article 18 of the Sanitary Officers  
(Outside London) Regulations, 1935.

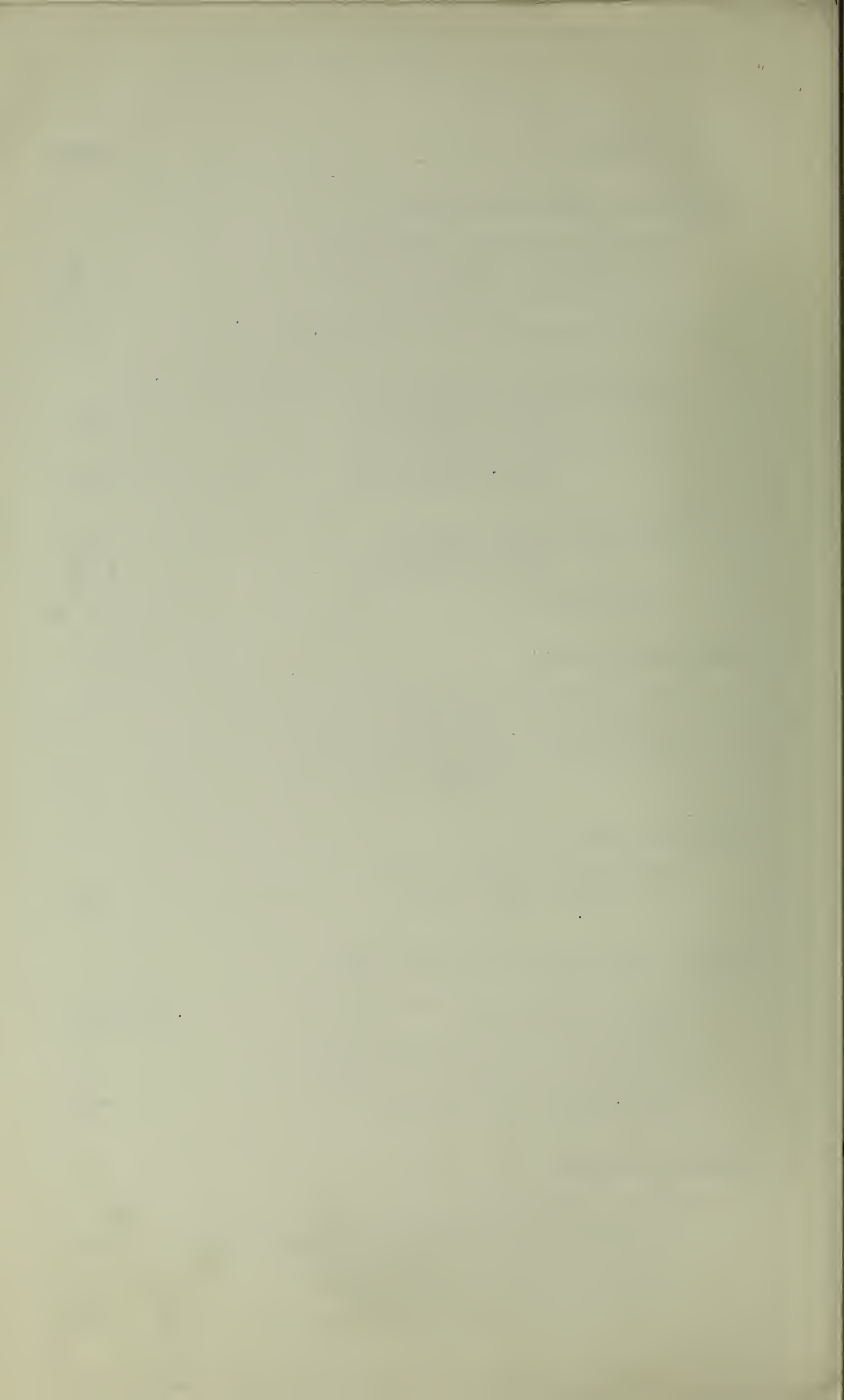
- (1) Number and nature of inspections made by the Corporation's Sanitary Inspectors and assistant Staff during 1948:

<u>Nature</u>	<u>Number</u>
<u>Public Health Act, 1936.</u>	
Regulated Premises Inspections:	
Common lodging-houses	7
Moveable dwellings and sites	11
Offensive trades	21
Statutory Nuisance Inspections:	
Initial inspections	52
Other inspections	161
Atmospheric Pollution:	
Industrial smoke observations	61
Visits to boiler plant	38
Pollution investigations (deposit and sulphur oxides sampling, etc.)	51





<u>Nature</u>	<u>Number</u>
<u>Public Health Act, 1936 (Contd.)</u>	
Verminous Infestation Inspections:	
Dwellinghouses - Corporation	24
Private	28
Other premises or articles	12
Infectious disease, etc., Enquiries:	105
General Sanitation and Drainage Inspections:	
Nuisances, not statutory -	
Initial Inspections	158
Other Inspections	356
Other sanitary defects -	
Initial Inspections	62
Other Inspections	234
Water Supplies:	
Sampling - Public supplies	110
Private supplies	10
Swimming bath water	31
Inspections	4
<u>Factories Act, 1937.</u>	
Inspections for Sanitary Conditions:	
Factories with mechanical power	71
Factories without mechanical power	9
Inspections for Means of Escape in	
case of fire - Initial inspections	2
Re-inspections	9
<u>Shops Act, 1934.</u>	
Inspections of shops to which	
Act applies - Food shops	113
Others	53
<u>Rats and Mice (Destruction) Act, 1919.</u>	
Inspections made in course of general	Not recorded
survey of district	in detail
Inspections of premises listed as	
'Particularly liable to infestation'	53
Inspections of Corporation premises	33
Inspections of premises receiving	
treatment, or on complaint	183
<u>Housing Act, 1936.</u>	
Housing Conditions:	
Inspections for housing defects	
(excluding Public Health Act inspections)	206
Houses inspected and recorded under	
Housing Consolidated Regulations	13
Inspections for compliance with	
notices (including work in progress)	714



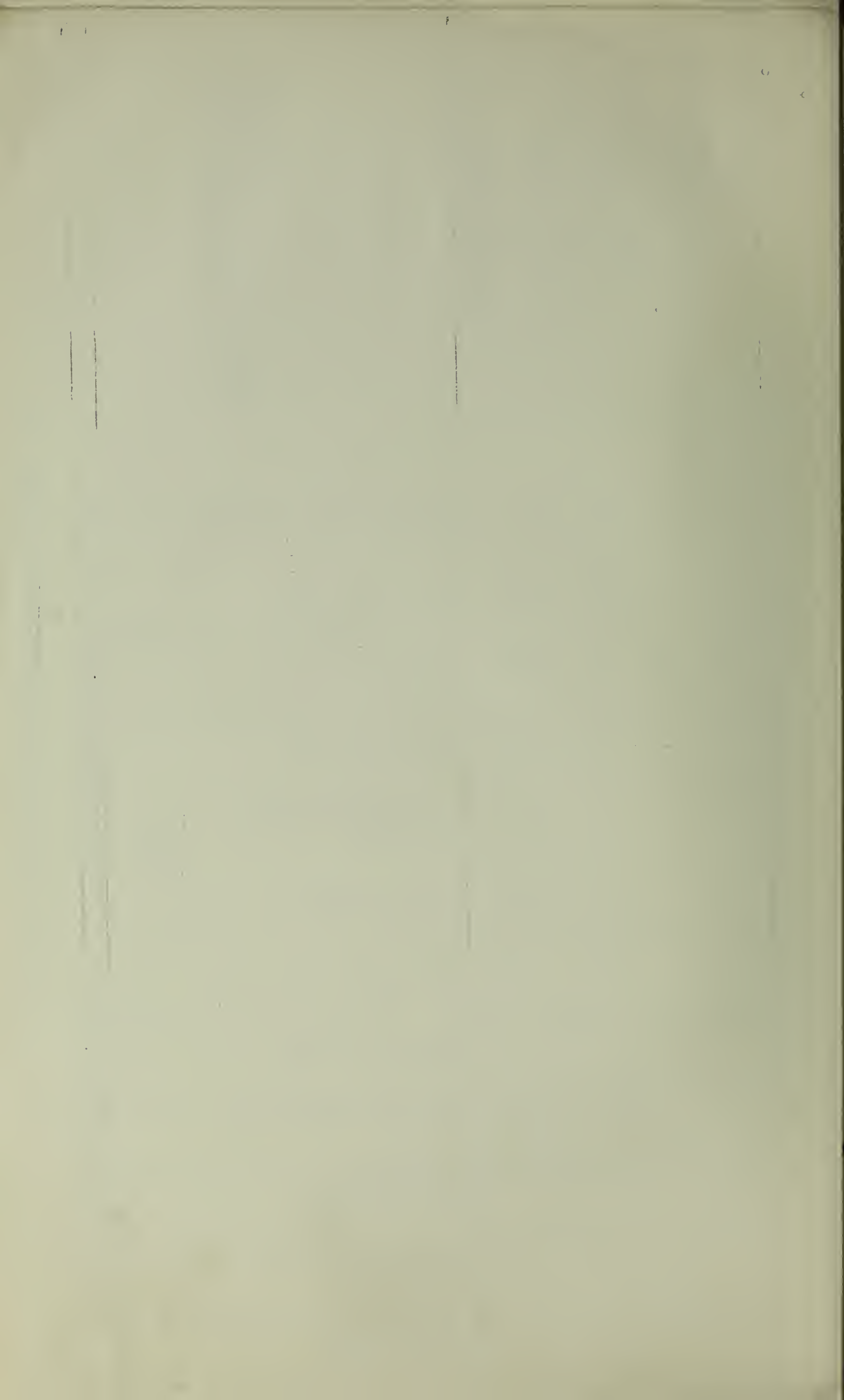
<u>Nature</u>	<u>Number</u>
<u>Housing Act, 1936 (Contd.)</u>	
Overcrowding:	
Case investigations	48
Dwellinghouses measured up for 'Permitted Number' data	40
Corporation Housing:	
Investigation of home conditions prior to removal to Corporation houses	218
Visits to tenants of Corporation houses to ascertain home conditions	37
Miscellaneous enquiries	4
<u>Food and Drugs Act, 1938.</u>	
Meat Inspection:	
Visits to Abattoir for meat inspection	335
Number of carcasses examined at Abattoir	8,468
Visits to shops, etc., for meat inspection	37
Milk Supplies:	
Investigation of production methods	29
Investigation of distribution methods	15
Sampling - Graded milks	100
Other milks	33
Ice-Cream:	
Investigations, also under Ice-Cream (Heat Treatment, etc.) Regulations -	
Manufacture	34
Retailing	16
Sampling	47
Other Foods:	
Visits to shops, etc., for food inspection	149
Number of articles or consignments of food examined	2,095
Food Premises Inspections:	
Cowsheds under Milk and Dairies Order	39
Pasteurising plant under Milk (Special Designations) Regulations, etc.	51
Other dairies	26
Abattoir and other premises under Public Health (Meat) Regulations	23
Rooms under Food and Drugs Act, section 13	361
Premises under Food and Drugs Act, section 14 - Ice-cream	75
Preserved food, etc.	29
Knackers Yard Inspections	11
Suspected Food Poisoning Enquiries	3
<u>Slaughter of Animals Act, 1933.</u>	
Investigations into licensing of Slaughtermen	18
Investigations into slaughter methods	7
<u>Miscellaneous Inspections</u> not falling into above categories	19





(2) Number of Notices Served and the Result of Service

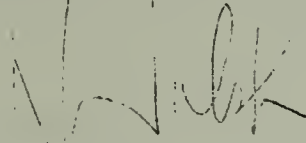
	No. of Informal Notices				No. of Statutory Notices				
	(a) Outstanding from 1947	(b) Served in 1948	(c) Total of (a) and (b)	(d) Complied with	Not complied with	(f) Outstanding from 1947	(h) Served in 1948	(i) Total of (g) and (h)	(j) Complied with
					(e) Statutory notice subsequently served in 1948 (f) Outstanding at end of 1948				
Act and Section under which or, in the case of informal notices, preliminarily to which, notice was served.									
Public Health Act, 1936:									
Section 39, 44 or 45	6	65	71	44	1	27	15	1	15
" 75		129	129	129					
" 93	37	25	62	53	3	6	3	3	3
Miscellaneous	1	8	9	6		2			
Housing Act, 1936:									
Section 9	61	134	195	132	6	57	15	6	16
Factories Act, 1937:									
Part One	2	8	10	8		2			
Rats and Mice (Destruction) Act, 1919:									
Section 5	8	99	107	101		6			



The Department

The Staff Establishment of Chief Sanitary Inspector, two Additional Inspectors, a pupil and two clerks, remained as fixed in 1946. During the year Mr. L.H. Cook, Senior Additional Inspector left the service of the Corporation and three months later his place was filled by Mr. G. Walshaw, who came here from Barnsley.

I am, Gentlemen,  
Your obedient Servant,



Chief Sanitary Inspector.

Chief Sanitary Inspector's Office,  
Municipal Offices,  
Pontefract.

June, 1949.

